



NIH funding opportunities



Faculty of Medicine and Health Sciences: Research Development and Support 30 July 2018 (#23)

[Click on blue [hyperlink](#) 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 www.grants.nih.gov.

Confirm your intent to apply ASAP, but not later than 30 days before the submission date.

Contact: RGMO Pre-Awards cdevries@sun.ac.za

Important Notices:

- NIH/AHRQ Application Submission/Resubmission Policy ([NOT-OD-18-197](#))
- Update on NIHs Next Generation Researchers Initiative (NGRI) Policy on Early Established Investigators (EIs) ([NOT-OD-18-214](#)). NIH will continue to prioritize funding for [Early Stage Investigators](#) (ESIs), and pending the deliberations of the ACD Next Generation Working Group, will use an interim strategy to consider “at risk investigators” (investigators with meritoriously-scored applications who would not have major NIH research funding if the application under consideration is not awarded and who do not have significant research support from other sources) in its funding strategies.
- Request for Information (RFI): Strategies for Advancing Sepsis Research Supported by NIGMS. ([NOT-GM-18-039](#)) National Institute of General Medical Sciences
- Notice of Clarification of AIDS Receipt Dates for PAR-18-844-Investigator Initiated Research in Computational Genomics and Data Science (R01 Clinical Trial Not Allowed) ([NOT-HG-18-012](#)) National Human Genome Research Institute
- Notice of Intent to Publish a Funding Opportunity Announcement for End-of-Life and Palliative Care Approaches to Advanced Signs and Symptoms (R01- Clinical Trial Optional) ([NOT-NR-18-013](#)) National Institute of Nursing Research
- Notice of Intent to Publish a Funding Opportunity Announcement for Neuromodulation/Neurostimulation Device Development for Mental Health Applications (R01 Clinical Trial Optional) ([NOT-MH-18-037](#)) National Institute of Mental Health
- Notice of Intent to Publish a Funding Opportunity Announcement for NINR Clinical Trial Planning Grant (R34- Clinical Trial Optional) ([NOT-NR-18-015](#)) National Institute of Nursing Research
- Notice of Intent to Publish a Funding Opportunity Announcement for Analytical and Clinical Validation of Biomarkers, Biomarker Signatures, and Endpoints for Pain Indications (R61/R33) ([NOT-NS-18-074](#)) National Institute of Neurological Disorders and Stroke

1. HIV Drug Resistance: Genotype-Phenotype-Outcome Correlations (Clinical Trial Not Allowed)

Letter of Intent: 30 days prior to the application due date

Hyperlink: ([RFA-AI-18-029](#))

Type: R01

Application Due Date: December 5, 2018. Apply by 5:00 PM local time of applicant organization.

Funding Opportunity Announcement: The purpose of this Funding Opportunity Announcement is to support studies that will evaluate HIV drug resistance and its relationship to treatment success. Applications are sought proposing studies of genotype/phenotype correlations in diverse subtypes, the relationship between drug resistance mutations present in minority variant viral populations and treatment outcomes, and on the reasons for the discordance between genotype and treatment success or failure. Laboratory evaluations of samples with clinical correlates in patients on recommended regimens are encouraged.

Budget: NIAID intends to commit \$2.4 million in FY 2019 to fund 3 to 6 awards. Application budgets are limited to \$500,000 per year in direct costs. The scope of the proposed project should determine the project period. The maximum project period is 5 years.

2. Development of Cell and Tissue Platforms to Detect Adverse Biological Consequences of Somatic Cell Genome Editing (Clinical Trial Not Allowed)

Letter of Intent: 30 days prior to the application due date

Hyperlink: [\(RFA-RM-18-022\)](#)

Type: U01

Application Due Date: October 18, 2018. Apply by 5:00 PM local time of applicant organization.

Funding Opportunity Announcement: The purpose of this Funding Opportunity Announcement (FOA) is to solicit applications that propose to develop and validate cell- and tissue-based platforms for assessing potential adverse biological consequences of somatic cell genome editing.

Budget: The NIH Common Fund (Office of Strategic Coordination) intends to commit up to \$4.0M per year in FY 2019-2022 to fund up to six awards, contingent upon NIH appropriations and the submission of a sufficient number of meritorious applications. Application budgets should not exceed \$415,000 direct costs per year in FY 2019 and need to reflect the actual needs of the proposed project. The maximum project period is four years (FY2019-2022).

3. Innovative Technologies to Deliver Genome Editing Machinery to Disease-relevant Cells and Tissues (Clinical Trial Not Allowed)

Letter of Intent: 30 days prior to the application due date

Hyperlink: [\(RFA-RM-18-023\)](#)

Type: UG3/UH3

Application Due Date: October 18, 2018. Apply by 5:00 PM local time of applicant organization.

Funding Opportunity Announcement: The purpose of this FOA is to support the development and evaluation of innovative approaches to deliver genome editing machinery into somatic cells, with the ultimate goal of accelerating the development of genome editing therapeutics to treat human disease. Projects will be supported through a two-phase, UG3/UH3 award mechanism. The initial 3-year UG3 phase will support proof of concept studies of delivery technologies and independent validation of targeted cell and tissue delivery in vivo. The 1-year UH3 phase will support scale-up and testing of genome editing technologies in collaboration with Large Animal Testing Centers.

Budget: The NIH Common Fund (Office of Strategic Coordination) intends to commit \$7.5M in FY 2019-2021 and \$12.0M in FY2022 to fund 8-10 awards, contingent upon NIH appropriations and the submission of a sufficient number of meritorious applications. Application budgets should not exceed \$500,000 direct costs per year for the UG3 Phase (FY 2019-FY 2021), and \$1M for the UH3 Phase (FY 2022). Application budgets need to reflect the actual needs of the proposed project. The maximum budget period is 4 years (FY 2019-2022).

4. Expanding the Human Genome Engineering Repertoire (Clinical Trial Not Allowed)

Letter of Intent: 30 days prior to the application due date

Hyperlink: [\(RFA-RM-18-024\)](#)

Type: U01

Application Due Date: October 18, 2018. Apply by 5:00 PM local time of applicant organization.

Funding Opportunity Announcement: The purpose of this Funding Opportunity Announcement (FOA) is to solicit applications proposing research on the development of novel and optimized alternatives to existing in vivo genome editing complexes.

Budget: The NIH Common Fund (Office of Strategic Coordination) intends to commit \$1.0M per year in FY 2019-2022 to fund up to three awards, contingent upon NIH appropriations and the submission of a sufficient number of meritorious applications. Application budgets should not exceed \$250,000 direct cost per year in FY 2019-FY 2022 and need to reflect the actual needs of the proposed project. The maximum budget period is 4 years (FY 2019-2022).

5. Innovative Technologies to Non-Invasively Monitor Genome Edited Cells In Vivo (Clinical Trial Not Allowed)

Letter of Intent: 30 days prior to the application due date

Hyperlink: [\(RFA-RM-18-025\)](#)

Type: UH2/UH3

Application Due Date: October 18, 2018 Apply by 5:00 PM local time of applicant organization.

Funding Opportunity Announcement: The purpose of this Funding Opportunity Announcement (FOA) is to support the development of innovative technologies to non-invasively label and monitor genome edited cells in vivo. The ultimate goal for these technologies is to inform on safety and efficacy of in vivo genome editing over time.

Budget: The NIH Common Fund (Office of Strategic Coordination) intends to commit up to \$1.0M per year in FY 2019-2020 and up to \$2.0M per year in FY 2021-2022 to fund up to four awards in FY 2019, contingent upon NIH appropriations and the submission of a sufficient number of meritorious applications. Application budgets should not exceed \$150,000 direct costs per year for the UH2 Phase (FY 2019-2020) and \$300,000 direct costs per year for the UH3 Phase (FY 2021-2022) and need to reflect the actual needs of the proposed project. The project period for the UH2 phase will be up to two years. The project period for the UH3 phase will be up to two years. The maximum project period is four years (FY 2019-2022).

6. Modular R01s in Cancer Control and Population Sciences (Clinical Trial Optional)

Letter of Intent: 30 days prior to the application due date

Hyperlink: [\(PAR-18-869\)](#)

Type: R01

Application Due Date: November 7, 2018; March 6, 2019; November 7, 2019; March 6, 2020; November 6, 2020; March 8, 2021. Apply by 5:00 PM local time of applicant organization.

Funding Opportunity Announcement: This funding opportunity announcement (FOA) encourages applications for research in cancer control and population sciences. The overarching goal is to provide support to promote research efforts on novel scientific ideas that have the potential to substantially advance cancer research in statistical and analytic methods, epidemiology, cancer survivorship, cancer-related behaviors and behavioral interventions, health care delivery, and implementation science.

Budget: The direct costs for any year may not exceed \$250K (excluding consortium F&A costs). Within that limit, applications need to reflect the actual needs of the proposed project. The maximum project period is 5 years.

7. Novel Approaches for Relating Genetic Variation to Function and Disease (Clinical Trial Not Allowed)

Letter of Intent: 30 days prior to the application due date

Hyperlink: [\(PA-18-867\)](#)
[\(PA-18-868\)](#)

Type: R21
R01

Application Due Date: [Standard dates](#) Apply by 5:00 PM local time of applicant organization.

Funding Opportunity Announcement: Genome-wide association studies and other disease studies have identified many variants that are statistically associated with disease risk, disease protection, or other traits. However, such studies do not generally show which specific variants in genomic elements cause these effects, or how they result in differences in function. Similarly, genomic sequencing studies in clinical settings have identified many variants in healthy and diseased individuals. However, the pathogenicity of such variants is often unknown, leading to their classification as variants of uncertain significance (VUS), which makes clinical implementation difficult. This Program Announcement and the companion R21 Program Announcement aim to support the development of novel and generalizable approaches to study how genetic variants lead to differences in function and to study how such functional differences affect human health and disease processes or how this knowledge can be used clinically.

Budget: R21 - The combined budget for direct costs for the two-year project period may be up to \$275,000 (exclusive of subcontract F&A). Up to \$200,000 may be requested in any single year. The project period is two years. R01 - 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 four years.

8. Research to Advance Vaccine Safety (Clinical Trial Not Allowed)

Letter of Intent: 30 days prior to the application due date

Hyperlink: [\(PA-18-872\)](#)
[\(PA-18-873\)](#)

Type: R21
R01

Application Due Date: [Standard dates](#) and [Standard AIDS dates](#) Apply by 5:00 PM local time of applicant organization.

Funding Opportunity Announcement: The purpose of this Funding Opportunity Announcement (FOA) is to support research that will contribute to the overall understanding of vaccine safety. This research opportunity encourages studies that address scientific areas potentially relevant to vaccine safety such as 1) characterization of physiological and immunological responses to vaccines and vaccine components, including different adjuvants; 2) how genetic variations affect immune/physiological responses that may impact vaccine safety; 3) identification of risk factors *e.g.*, infection history, predisposition to or presence of allergic and/or autoimmune disease and biological markers that may be used to assess whether there is a relationship between certain diseases or disorders and licensed vaccines; 4) creation/evaluation of statistical methodologies for analyzing data on vaccine safety, including data available from existing data sources such as passive reporting systems or healthcare databases; or 5) the application of genomic/molecular technologies and systems biology approaches to evaluate vaccine safety. This FOA aligns with the research goals and objectives outlined in the [U.S. National Vaccine Plan](#).

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. The maximum project period is two years. R01- Application budgets are not limited but need to reflect the actual needs of the proposed project. The scope of the project should determine the project period. The maximum project period is five years.

9. Expanding Extramural Research Opportunities at the NIH Clinical Center (Clinical Trial Optional)

Letter of Intent: 30 days prior to the application due date

Hyperlink: [\(PAR-18-879\)](#)

Type: U01

Application Due Date: December 3, 2018, December 3, 2019, December 3, 2020. Apply by 5:00 PM local time of applicant organization.

Funding Opportunity Announcement: The purpose of this FOA is to support extramural investigator-initiated clinical research in partnership with the NIH Clinical Center in Bethesda, MD. This new FOA will leverage the resources (inpatient and outpatient) and assets of the NIH Clinical Center (*e.g.*, scientific and clinical expertise, nursing, beds, critical care services, ambulatory care services, laboratories, imaging, biostatistics, protocol development, regulatory guidance, clinical trials management and safety oversight) in accelerating the discovery and translation from laboratory to clinic of therapies for infectious (including primary immunodeficiency diseases), immunologic, and allergic diseases. Specifically, it will support hypothesis-driven mechanistic studies alone or within clinical projects employing Phase 0, 1, and/or 2a clinical trial designs.

Budget: The number of awards is contingent upon NIH appropriations and the submission of a sufficient number of meritorious applications. NIAID intends to fund up to 3 awards. Application budgets need to reflect actual needs of the proposed project and may not exceed \$400,000 direct cost per year. These funds may only be used to support the activities within the PD(s)/PI(s) (extramural scientists) research laboratory and exclude any Clinical Center or intramural costs, if applicable. The scope of the proposed project should determine the project period. The maximum period is five years.

Brief definitions of some NIH grant mechanisms: [comprehensive list of extramural grant and cooperative agreement activity codes](#)

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