



# NIH funding opportunities



Faculty of Medicine and Health Sciences: Research Development and Support

02 Feb 2015

[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](http://www.grants.nih.gov).

Please be advised that you **must contact the Research Grants Management Office (RGMO) at least 60 days before the submission date**, Mr Eugene Baugaard ([eugeneb@sun.ac.za](mailto:eugeneb@sun.ac.za)), or as soon as you commit to apply for an NIH grant and that the grant is submitted institutionally.

## Important notices

- **Adjustments to NIH and AHRQ Grant Application Due Dates Between February 13 and February 18, 2015** ([NOT-OD-15-057](#))
- **Expanding Support of Unicode Character Set in Grant Applications Submitted after February 17, 2015** ([NOT-OD-15-058](#))
- **Findings of Research Misconduct** ([NOT-OD-15-061](#))
- **Notice of Intent to Publish a Funding Opportunity Announcement for NIAAA Collaborative Partnership on HIV/AIDS and Alcohol-Related Outcomes Research (U54)** ([NOT-AA-15-004](#)), Consortiums, (U01) ([NOT-AA-15-005](#)), Administrative Resource (U24) ([NOT-AA-15-006](#)) and ([NOT-AA-15-007](#))
- **The National Cancer Institute Policy Ensuring Public Availability of Results from NCI-supported Clinical Trials** ([NOT-CA-15-011](#))
- **AHRQ Announces Interest in Research on Health IT Safety** ([NOT-HS-15-005](#))

### 1. Title: Systems Biology and Antibacterial Resistance

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

**Hyperlink:** ([RFA-AI-14-064](#))

**Type:** U01

**Application Due Date:** July 9, 2015, by 5:00 PM local time of applicant organization.

**Purpose:** This Funding Opportunity Announcement (FOA) solicits applications that use a multi-disciplinary systems biology approach to study the molecular interaction networks of the pathogen and the host in association with antibacterial resistance or in response to treatment of antibacterial resistant infections. The application's focus must be on bacterial pathogens with established antibacterial resistance. This FOA will not support applications focused on drug-resistant tuberculosis

**Budget:** Budgets for total costs of up to \$2 million per year may be requested. The scope of the proposed project should determine the project period. The maximum project period is 5 years.

### 2. Title: Brain Initiative: New Concepts and Early-Stage Research for Large-Scale Recording and Modulation in the Nervous System

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

**Hyperlink:** ([RFA-EY-15-001](#))

**Type:** R21

**Application Due Date:** April 16, 2015, by 5:00 PM local time of applicant organization.

**Purpose:** A central goal of the BRAIN Initiative is to understand how electrical and chemical signals code information in neural circuits and give rise to sensations, thoughts, emotions and actions. Available technologies for recording and manipulating neural circuit activity in human and animal experiments are not sufficient to accomplish this goal. Non-invasive technologies are low resolution and/or provide indirect measures such as blood flow, which are imprecise. Invasive technologies can provide information at the level of single neurons producing the fundamental biophysical signals, but they can only be applied to tens or hundreds of neurons, out of a total number in the human brain estimated at 85 billion. Previous BRAIN FOAs sought to develop novel technology (RFA-NS-15-003) or to optimize existing technology ready for in-vivo proof-of-concept testing and collection of preliminary data (RFA-NS-15-004). This FOA seeks applications for technology at an even earlier stage of development. It seeks new and untested ideas that are in the very earliest stages. The support provided might enable calculations, simulations, computational models, or other mathematical approaches for demonstrating that the signal sources and/or measurement technologies are theoretically capable of meeting the demands of large-scale recording or manipulation of circuit activity. The support might also be used for building and testing phantoms, prototypes, in-vitro or other bench-top models in order to validate underlying theoretical assumptions in preparation for future FOAs aimed at testing in animal models. Invasive or non-invasive approaches are sought that will ultimately enable or reduce the current barriers to large-scale recording or manipulation of neural activity, and that would be compatible with experiments in humans or behaving animals. Applications are encouraged from any qualified individuals, including physicists, engineers, theoreticians, and scientists, especially those not typically involved with neuroscience research.

**Budget:** The combined budget for direct costs for the two year project period may not exceed \$300,000. No more than \$200,000 may be requested in any single year.

**3. Title: The Human Placenta Project: Developing Paradigm-Shifting Innovations for in vivo Human Placental Assessment**

**Letter of Intent due date:** February 28, 2015 **Hyperlink:** [\(RFA-HD-15-032\)](#) **Type:** U34

**Application Due Date:** March 31, 2015, by 5:00 PM local time of applicant organization

**Purpose:** This funding opportunity announcement in support of the Human Placenta Project (HPP) aims to support the initial stages of development of entirely new or next-generation placental imaging and assessment technologies and methods that will increase our capability to safely assess human placental structure and function in vivo throughout gestation.

**Budget:** Application budgets are limited to \$300,000 in direct costs per year, but need to reflect the actual needs of the proposed project. The maximum project period is 3 years.

**4. Title: Maternal Nutrition and Pre-pregnancy Obesity: Effects on Mothers, Infants and Children**

**Letter of Intent due date:** 30 days prior to the application due date **Hyperlink:** [\(PA-15-100\)](#) **Type:** RO1

**Application Due Date:** Standard dates apply (Jun 5, 2015 and Oct 5, 2015) by 5:00 PM local time of applicant organization and Standard AIDS dates apply (May 7, Sep 7) by 5:00 PM local time of applicant organization.

**Purpose:** This Funding Opportunity Announcement (FOA) encourages applications to improve health outcomes for women, infants and children, by stimulating interdisciplinary research focused on maternal nutrition and pre-pregnancy obesity. Maternal health significantly impacts not only the mother but also the intrauterine environment, and subsequently fetal development and the health of the newborn.

**Budget:** Application budgets are not limited but need to reflect the actual needs of the proposed project. The total project period for an application submitted in response to this funding opportunity may not exceed 3 years.

**5. Title: Novel Biomarkers for the Development of HIV Incidence Assays with Improved Specificity**

**Letter of Intent due date:** 30 days prior to the application due date **Hyperlink:** [\(PA-15-105\)](#) **Type:** RO1

**Application Due Date:** Standard dates apply (Jun 5, 2015 and Oct 5, 2015) by 5:00 PM local time of applicant organization and Standard AIDS dates apply (May 7, Sep 7) by 5:00 PM local time of applicant organization. [\(PA-15-106\)](#) R21

**Purpose:** This Funding Opportunity Announcement (FOA) invites applications to support the development of novel biomarkers and improved HIV incidence assays and algorithms with increased specificity for distinguishing incident from chronic HIV infections.

**Budget:** RO1: Application budgets are not limited but need to reflect the actual needs of the proposed project. The maximum project period is 5 years. 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.

**6. Title: Role of Exosomes in HIV Pathogenesis**

**Letter of Intent due date:** 30 days prior to the application due date **Hyperlink:** [\(PA-15-107\)](#) **Type:** R21

**Application Due Date:** Standard dates apply (Jun 5, 2015 and Oct 5, 2015) by 5:00 PM local time of applicant organization and Standard AIDS dates apply (May 7, Sep 7) by 5:00 PM local time of applicant organization.

**Purpose:** The purpose of this Funding Opportunity Announcement (FOA) is to stimulate new research on the potential role of exosomes in cell-to-cell communication relevant to HIV transmission, innate or adaptive immune responses to HIV, or HIV pathogenesis.

**Budget:** 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.

**7. Title: Core Infrastructure and Methodological Research for Cancer Epidemiology Cohorts**

**Letter of Intent due date:** 30 days prior to the application due date **Hyperlink:** [\(PAR-15-104\)](#) **Type:** UO1

**Application Due Date:** April 1, 2015; July 8, 2015; November 10, 2015; March 11, 2016; July 8, 2016; November 10, 2016; March 10, 2017, by 5:00 PM local time of applicant organization.

**Purpose:** The Funding Opportunity Announcement (FOA) invites grant applications for targeted infrastructure support of the core functions of Cancer Epidemiology Cohorts (CECs) and methodological research. Through this FOA, the National Cancer Institute (NCI) will support infrastructure and core functions for existing or new CECs. This FOA will also lead to support of core functions for CECs currently funded through other grant mechanisms by the Epidemiology and Genomics Research Program (EGRP) and other components of the Division of Cancer Control and Population Sciences (DCCPS) at the NCI.

**Budget:** 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.

**8. Title: Multilevel Interventions in Cancer Care Delivery: Building from the Problem of Follow-up to Abnormal Screening Tests**

**Letter of Intent due date:** 30 days prior to the application due date **Hyperlink:** [\(PAR-15-108\)](#) **Type:** UO1

**Application Due Date:** April 9, 2015; November 25, 2015; May 26, 2016; September 21, 2016; May 26, 2017; September 21, 2017, by 5:00 PM local time of applicant organization.

**Purpose:** This Funding Opportunity Announcement (FOA) encourages applications that strengthen the science of multilevel effects of cancer care interventions by addressing the problem of incomplete follow-up to abnormal screening tests for breast, colorectal, cervical and lung cancers. The goals of this FOA are two-fold. First, this FOA seeks to advance the science of multilevel interventions in three ways: a) by establishing a common conceptualization of levels and the associated level-specific factors that affect practice; b) by standardizing metrics of the levels and their main effects on other levels and the individuals needing follow-up care; and c) by developing and standardizing the analysis of the effect of interventions on the individuals, groups, and organizations responsible for intervention implementation. Second, this FOA encourages applications that test interventions to improve the follow-up of abnormal screening in one or more ways, including: a) measuring multilevel effects of single-level interventions; b) comparing single vs. multilevel interventions; and c) testing multilevel interventions.

**Budget:** Application budgets are expected to differ, reflecting the actual needs of the proposed projects. It is anticipated and encouraged, however, that most requests be in the range of \$450,000 to \$500,000 direct costs per year commensurate with the scope and complexity of the proposed projects. Larger budgets may be requested but no request may exceed \$750,000 in direct costs per year. The total project period may not exceed 4 years.

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

**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.

**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).

**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, small-contained research projects, development of new research technology, etc.; normally for “new investigators”; not renewable; up to 2 years; budget generally <\$50,000 (direct costs).

**UH2/UH3 - Phase Innovation Awards Cooperative Agreement:** Exploratory/Developmental Cooperative Agreement Phase I and II. 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.

**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).

**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.

Complete [Glossary and acronym list of NIH Terms](#)



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