

UPR external funding success is of utmost importance to strengthen the connection between its investigators/faculty and funding entities who have the potential to sponsor their research and academic endeavors. This publication has been developed in order to summarize funding opportunities and promote the participation of faculty and collaborative research groups in their intent to apply for external funds. Such efforts are aligned with the UPR Strategic Plan 2017-2022: A New Era of Innovation and Transformation for Student Success; Certification 50 (2016-2017) of the Governing Board, December 19, 2016. Strategic Area: Research and Creative Work. Goal 2: Increase Applications for and awards of external funds for research and creative work.

SELECTED FUNDING OPPORTUNITIES

This is a selection of identified funding opportunities for the period ending 8/23/2022 and is in no way all-inclusive of funding opportunities available. Further information has been shared with External Resource Coordinators and Research Coordinators at each UPR campus by e-mail or MS Teams.

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Vicepresidencia de Recursos Externos



Universidad
de Puerto Rico

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1. NHPRC-Mellon Planning Grants for Collaborative Digital Editions in African American, Asian American, Hispanic American, and Native American History and Ethnic Studies, National Archives

Application Deadline:

- **Optional Draft: April 1, 2023**
- **Full Proposal: June 7, 2023**

Award Budget: up to two years and for up to \$60,000 per year

The National Historical Publications and Records Commission (NHPRC), with funding provided by the Andrew W. Mellon Foundation, seeks proposals for its planning grant program for Collaborative Digital Editions in African American, Asian American, Hispanic American, and Native American History and Ethnic Studies. With an overarching goal to broaden participation in the production and publication of historical and scholarly digital editions, the program is designed:

- To provide opportunities that augment the preparation and training of Black, Indigenous, and People of Color new to the work of historical documentary editing, especially those currently working in history or related area and ethnic studies departments.
- To encourage the innovative and collaborative re-thinking of the historical and scholarly digital edition itself—how it is conceived, whose voices it centers, and for what purposes.
- To support planning activities essential for successful development of significant, innovative, and well-conceived digital edition projects rooted in African American, Asian American, Hispanic American, and Native American history and ethnic studies.
- To stimulate meaningful, mutually beneficial, and respectful collaborations that help to bridge longstanding institutional inequalities by promoting resource sharing and capacity building at all levels.
- To sustain projects that build meaningful community and user engagement into their plans.

Collaboration

Grants are awarded to collaborative teams consisting of at least two scholar-editors, as well as one or more archivists, digital scholars, data curators, and/or other support and technical staff, as appropriate to fulfill the planning goals and prepare the project team for implementation at a later stage. We strongly encourage applications from collaborative teams that include diverse faculty and staff in key positions, and that include editorial, archival, and technical staff at Historically Black Colleges and Universities, Hispanic- and Minority-Serving Institutions, Tribal Colleges, and/or other Indigenous and Native American tribal scholars and community members, and members of the Asian American community. We also encourage projects to seek out community members as well as undergraduate and graduate students to contribute to (and benefit from) participation in all phases of the project planning.

What is a digital edition? How can I make the most of this planning opportunity?

Eligible projects in this category are encouraged to focus their planning activities on the essentials, beginning with project conception and scope (including plans for understanding and incorporating target user community input); establishing a mutually-beneficial, respectful, and sustainable collaboration; securing long-term institutional support; establishing editorial workflow processes and associated staffing needs (for collecting, describing, preserving, compiling, transcribing, annotating, encoding, and publishing the edition); as well as long-term technical and financial sustainability, among other planning issues (see below).

Eligible activities in this category may include:

- Travel and related costs for planning meetings involving geographically-dispersed collaborations.
- Relevant training for project directors, staff, and participating community members, including (but not limited to) NHPRC-supported training opportunities.
- Associated costs for technical planning, wire-framing, and early testing and evaluation with target audience(s) to determine needs and priorities.
- For projects undertaking an extensive or supplementary document search, funds also may be used for initial surveying of undigitized collections, sample document imaging and collection, canvassing, community outreach, and related travel.

Link to Additional Information: <https://www.archives.gov/nhprc/announcement/digitaleditions>

2. Mid-Career Advancement (MCA), NSF

Submission Window Date: February 01, 2023 - March 01, 2023

Award Budget: \$14,000,000 to \$18,000,000 for 35-45 projects. The amount varies across disciplinary research programs

The program offers an opportunity for scientists and engineers at the mid-career stage to substantively enhance and advance their research program and career trajectory. Mid-career scientists are at a critical career transition stage where they need to advance their research programs to ensure long-term productivity and creativity but are often constrained by service, teaching, or other activities that limit the amount of time devoted to research. MCA support is expected to help lift these constraints to reduce workload inequities and enable a more diverse scientific workforce (more women, persons with disabilities, and individuals from groups that have been underrepresented) at high academic ranks.

The MCA program provides protected time, resources, and the means to gain new skills through synergistic and mutually beneficial partnerships, typically at an institution other than the candidate's home institution. Partners from outside the PI's own sub-discipline or discipline are encouraged, but not required, to enhance interdisciplinary networking and convergence across science and engineering fields. Research projects that envision new insights on existing problems or identify new problems made accessible with cutting-edge methodology or expertise from other fields are encouraged.

All MCA proposals must include letters from a) the partner(s) describing the nature of the collaboration and the benefits of doing so for both parties, as well as b) the departmental chairperson (or an equivalent organizational official). The Project Description of an MCA proposal must include the following three sections in addition to the other required elements as defined in the PAPPG (for example, Broader Impacts). These are described in more detail under Proposal Preparation Instructions and include:

- Candidate's Past Research
- Candidate's Proposed Research Advancement and Training Plan
- Candidate's Long-Term Career Plans

MCA proposals must also provide convincing evidence that the candidate's research program could substantively benefit from the protected time and resources provided, such that there is a substantial enhancement to their research and career trajectory, enabling scientific and academic advancement not likely without this support.

PIs are strongly encouraged to discuss the suitability of their MCA proposal with a Program Officer from the appropriate directorate (see https://www.nsf.gov/bio/MCA_contacts.jsp). Only PIs whose current or proposed research falls within the purview of a participating program are eligible.

Link to Additional Information: <https://www.nsf.gov/pubs/2022/nsf22603/nsf22603.htm>

3. Institutes for Historical Editing, National Historical Publications & Records Commission

Application Deadline:

- **Optional Draft: October 1, 2022**
- **Full Proposal: December 8, 2022**

Award Budget:

- **R21 phase: the combined budget for direct costs for a two-year project period may not exceed \$275,000. No more than \$200,000 may be requested in any single year.**
- **R33 phase: application budgets must remain under \$500,000 in annual direct costs.**

The National Historical Publications and Records Commission seeks proposals to advance inclusive participation, training, education, dialog, and collaborative exchange amongst a diverse and growing community of academic and non-academic practitioners in the editing and publishing of historical records, including the related practices of digital scholarly editing, digital ethnic studies, digital history, and digital humanities.

Applicants in this funding category must adhere to the following goals and objectives:

- **Core Values:** Project plans (including staffing model and planned activities) must demonstrate a commitment to

fostering an inclusive, respectful, and welcoming environment, and upholding core values of collaboration, experimentation, co-creation, innovation, creativity, and diversity in all forms—practitioner, profession, practice, perspective, and method.

- **Technical and Institutional Infrastructure:** Must be committed to creating and sustaining an open and accessible online platform that can serve multiple purposes, including but not limited to hosting pertinent educational content, courses, discussions, and other resources and information.
- **Staffing Model and Programming:** Plans must include an appropriate staffing model suited to organizing and hosting a suite of regular programming that advances diverse practitioner community conversations, and provides networking opportunities, workshops, and other professional development activities.
- **Promotion and Outreach:** Promotional plans and outreach activities must demonstrate an ongoing commitment to engaging, listening to, and supporting a diverse and inclusive community of academic and non-academic practitioners.
- **Collaboration:** Plans must include a diverse and collaborative team of core faculty and staff (including but not limited to scholar-editors, digital archivists, digital scholars, and/or data curators, as well as communications and technical support staff, as appropriate) who are knowledgeable in the practices and workflows associated with collecting, describing, preserving, compiling, transcribing, contextualizing, annotating, editing, encoding, and publishing historical records and other documentary source materials.

Link to Additional Information: <https://grants.nih.gov/grants/guide/pa-files/PA-20-070.html>

4. NIDA REI: Research at Minority Serving Institutions on Neurocognitive Mechanisms Underlying the Impact of Structural Racism on the Substance Use Trajectory (R61/R33 Clinical Trial Optional), NIH

Application Deadline:

- **Letter of Intent: 30 days prior to the application due dates**
- **Full Proposal: November 14, 2022, November 14, 2023**

Award Budget:

- **R61 planning phase - the combined budget for direct costs for up to two years may not exceed \$500,000**
- **R33 phase - the budget for direct costs may not exceed \$500,000 in any single year**

This opportunity invites clinical research applications that are exploratory/developmental in nature and seek to parse the complex effects of structural racism, and investigate its impact on neurocognition, with an emphasis on reducing Substance Use Disorder (SUD) risk and informing preventative interventions.

Research Objectives

This funding announcement invites exploratory mechanistic research seeking to parse the complex effects of structural racism and investigate its impact on neurocognition, with an emphasis on reducing SUD risk and informing preventative interventions. Applications are strongly encouraged to incorporate a multidimensional and intersectional approach to understanding structural racism, including but not limited to factors such as income inequality, homeownership inequity, employment inequity, education inequity, incarceration inequity, area deprivation, food insecurity, and neighborhood segregation. In addition to neuroscience/psychology, all applications are expected to incorporate expertise as needed from fields including but not limited to epidemiology, intervention science, community-engaged research, sociology, and/or ethnic studies. Applications are expected to justify how study variables are connected to structural racism. The proposed neurocognitive mechanisms are expected to be relevant to the development of preventative interventions (including prevention of substance use initiation, escalation, and development of an SUD), but applications are not required to propose an intervention per se.

Topics of interest include, but are not limited to:

- Development and application of assessment tools towards capturing multidimensional socio-environmental influences that minimize participant burden and increase inclusion of underserved racial and ethnic minority groups

- Application of sophisticated analytical methods to investigate multivariate and/or non-linear relationships within large, complex socio-environmental datasets (e.g., testing non-linear dynamics involving structural factors and individual characteristics)
- Identification of novel mediating pathways linking the experience of structural inequities and racism (including effects of stigmatization and discrimination) to neurocognition pertaining to SUD risk (e.g., brain-gut interactions, CNS-immune and CNS-endocrine system interactions, epigenetic modifications)
- Secondary analysis of large longitudinal datasets (e.g., Adolescent Brain Cognitive DevelopmentSM(ABCD), HEALthy Brain and Child Development (HBCD)) to examine causal pathways between exposure to structural racism and psychophysiological or neurobiological risks that may affect the onset or course of substance use
- Identification of the neurocognitive mechanisms through which protective factors (e.g., support from and connections with racial and ethnic minority community) moderate the influence of racism, specifically those that could inform development of novel interventions
- Investigation of the neurocognitive effects of structural or interpersonal interventions designed to address the impacts of racism
- Development of novel interventions targeting the neurocognitive level that modulate behavior and/or cognition relevant to the intersection of SUD and racism

Applications are not required to include a substance-using population or substance use outcomes but are expected to inform our understanding of SUD-relevant cognition, behavior, and/or neurocircuitry. Descriptive studies that do not examine neurocognitive mechanisms and only describe associations between social determinants of health and clinical outcomes will be deemed nonresponsive to this FOA.

Phased Award Mechanism and Transition to R33

This funding opportunity uses a R61/R33 Phased Innovation Award mechanism. Support will be provided for up to 5 years, which includes initial support of up to 2 years of the R61 phase, followed by up to 3 years of support for the R33 phase upon successfully meeting R61 milestones. For transition to the R33 phase, awardees must submit the transition package no less than two months before the completion of the R61 phase. The transition plan should include the R61 progress report describing in detail the progress towards the R61 milestones and a description of how research proposed for the R33 phase will be supported by the completion of the R61 phase milestones. These materials will be evaluated by NIH Program staff. R33 funding decisions will be based on the original R61/R33 peer review recommendations, successful completion of transition milestones, Program priorities, and availability of funds.

Additional Considerations

- Preliminary data are not required; however, applicants may include preliminary data if they are available.
- Given the high risk/high reward nature of this funding opportunity, applicants are encouraged to present a well-designed research plan that addresses appropriate scientific controls, pitfalls, and alternative approaches.
- It is expected that proposed milestones be quantitative in nature. Applicants are strongly encouraged to calculate and report effect size (e.g., percentage of variance explained), in addition to statistical significance, whenever possible.
- Given the risky nature of the R61 phase, it is expected that about 50% or more of funded projects will not proceed to the R33 phase.

NIDA's Racial Equity Initiative: Common Goals and Collaboration

NIDA's REI seeks to address persistent racial and ethnic disparities in substance abuse outcomes in the United States. All REI projects must include some form of community engagement in the conduct of the research, and all projects must commit to broad dissemination of research findings across multiple audiences, such as scientific, stakeholder groups, providers, policy makers, research volunteers, and the public.

Link to Additional Information: <https://grants.nih.gov/grants/guide/rfa-files/RFA-DA-23-029.html>

5. Institute of Education Sciences (IES): National Center for Education Research (NCER) and National Center for Special Education Research (NCSER), Dept. of Education

Application Deadline:

- **NCER: February 23, 2023**
- **NCSER: January 12, 2023**

Award Budget:

- **NCER: \$80,000 to \$200,000 for up to two years**
- **NCSER: \$500,000 to \$1,000,000 for up to five years**

The IES research grant programs are designed to provide interested individuals and the general public with reliable and valid information about education practices that support learning and improve academic achievement and access to education opportunities for all learners.

Through the Research Networks Focused on Critical Problems of Education Policy and Practice grant program, the National Center for Education Research (NCER) focuses resources and attention on specific education problems or issues that are a high priority for the Nation. NCER also establishes both a structure and process for researchers who are working on these issues to share ideas, build new knowledge, and strengthen their research and dissemination capacity. Through this program, NCER seeks to establish a new Career and Technical Education Research Network and seeks to expand the Digital Learning Platforms Network, also known as SEERNet (<https://www.seernet.org>), which was originally established in FY 2021.

The National Center for Special Education Research (NCSER) supports research to expand knowledge and understanding of the needs of infants, toddlers, and youth with disabilities to improve the developmental, education, and transition outcomes of such individuals. Through NCSER, IES invests in Special Education Research and Development Centers (R&D Centers) that contribute to the body of special education knowledge in the United States by engaging in research, development, evaluation, and national leadership activities aimed at improving the education system and, ultimately, student achievement. Through this program, NCSER seeks to establish a new R&D Center on Supporting Students with Disabilities in Postsecondary Education.

Research competitions:

1. **NCER Competition** - The Research Networks Focused on Critical Problems of Education Policy and Practice Competition (ALN 84.305N). Under this competition, NCER will consider only applications that address one of the following topics:
 - Career and Technical Education Research Network, which includes a single Network Lead in FY23. (The CTE Network will conduct research on CTE through projects funded by other IES grant competitions). For additional information about this topic, please see the notice inviting applications for the Lead of a Career and Technical Education (CTE) Network: Research Networks Focused on Critical Problems of Education Policy and Practice published elsewhere in this issue of the Federal Register.
 - Digital Learning Platforms Network, which includes research teams.
2. **NCSER Competition** - The Special Education Research and Development Center Competition (ALN 84.324C). Under this competition, NCSER will consider only applications that address the following topic:
 - Research Center on Supporting Students with Disabilities in Postsecondary Education

Link to Additional Information: <https://grants.nih.gov/grants/guide/pa-files/PAR-20-070.html>

6. Administrative Supplements to Support Cancer Disparity Collaborative Research (Clinical Trial Optional), NIH

Application Deadline: January 23, 2023; September 06, 2023

Award Budget: limited to \$150,000 direct costs for up to 12 months, for a maximum of two years

The purpose of the program is to promote new cancer disparities research among investigators who do not normally conduct it and to encourage the partnership of experienced cancer research investigators with cancer disparities-focused researchers. This FOA is intended to accelerate and strengthen multi-disciplinary cancer disparities research in wide ranging areas. Cancer disparities research includes, but is not limited to basic, translational, behavioral, observational, interventional, environmental and population research studies that address the adverse differences in cancer incidence, prevalence, mortality, survivorship, burden and/or response to treatment in racial/ethnic minorities and/or underserved population groups. Proposed collaborations should focus on achieving research objectives that by necessity rely on diverse and complementary expertise, technical capabilities, and resource sets. Importantly, the supplemental request is required to be within the scope of the parent award and should expand the original aims to include a cancer disparity component and possible inclusion of international comparator cohorts. A trans NCI effort, the concept reissuance of the Collaborative Program is supported by NCI's Division of Cancer Biology (DCB), Division of Cancer Treatment and Diagnosis (DCTD), Division of Cancer Prevention (DCP), Division of Cancer Control and Population Sciences (DCCPS), Center to Reduce Cancer Health Disparities (CRCHD) and now, also included Center for Global Health.

Key Terms for this FOA:

- **Applicant:** an investigator who holds an active and eligible NCI-funded award (parent grant), not focused on cancer disparities, and is interested in expanding his/her research in the cancer disparities arena through collaboration. Additionally, the applicant should not have served previously as a Principal Investigator (PI) on a cancer disparities research grant. The applicant serves as the PI of the Supplement and will identify a collaborator with whom to implement the proposed cancer disparities research project.
- **Collaborator:** the investigator with whom the applicant will collaborate to implement the proposed cancer disparities research project. The collaborator should have a track record in conducting research (as demonstrated by publication record and/or funding support) in the areas of cancer disparities and/or minority health research. He/she will bring non-overlapping yet complementary expertise to the collaboration.
- **Cancer Disparities Research:** addresses the disproportionate cancer burden among racial/ethnic minority and/or underserved populations and seeks to understand and/or reduce differences in cancer outcomes. This research spans across the cancer continuum (prevention, early detection, diagnosis, treatment, and survivorship) and includes comparative biological, behavioral, environmental, social, clinical, or translational investigations among one or more racial/ethnic minority or underserved group. In contrast to minority health research (see below), disparities research is a comparative analysis between two different racial/ethnic minority and/or underserved groups, or one racial/ethnic minority and/or underserved group in different settings and/or environments.
- **Minority Health Research:** is the scientific investigation of distinctive health characteristics and attributes of racial/ethnic minority groups who are underrepresented in biomedical research.

The collaborator should have a track record in conducting research (as demonstrated by publication record and/or funding support) in the areas of cancer disparities and/or minority health research. Collaborations may include investigators from the same or different departments within an institution, or from different institutions. The parent grant must have at least 2 full years of active funding (excluding no-cost extension periods) remaining at the time of submission.

Research areas that are appropriate to the goals of this FOA include but are not limited to studies that:

- Basic Cancer Biology
- Cancer Prevention
- Population Sciences
- Translational and Clinical Studies
- Global Health

Link to Additional Information: <https://grants.nih.gov/grants/guide/pa-files/PA-22-114.html>

7. NIAMS Clinical Trial Planning Grant (R34) - Clinical Trial Not Allowed, NIH

Application Deadline:

- **Letter of Intent: February 3, 2023**

- **Full Proposal: March 03, 2023; July 02, 2023**

Award Budget: combined budget for direct costs may not exceed \$300,000 for the two-year project period

This R34 clinical trial planning grant mechanism is intended to support work necessary for the launching of a complex and/or large future clinical trial. This mechanism will provide an investigator the time and resources to accomplish planning activities [e.g., preparation of the manual of operating procedures, development of informed consent forms and case report forms (CRFs)] that are critical prior to implementing a clinical trial. If investigators will subsequently be seeking a Clinical Trial Implementation Cooperative Agreement (U01) from NIAMS, successful completion of this mechanism, or documentation that all necessary planning steps have been accomplished through other means (via completion and submission of the NIAMS Clinical Trial Planning Milestone Checklist), is required prior to submission of an NIAMS U01 application.

The NIAMS R34 is intended to support necessary administrative activities before enrollment of subjects into the future clinical trial begins. The collection or evaluation of any pre-clinical or clinical data with human subjects is not allowed in this R34. The only allowable use of human subjects in this R34 is for Model Recruitment. Model recruitment is intended to test the feasibility of recruitment methods, not the feasibility of the intervention. Model recruitment can be conducted with interested and eligible participants through the use of interviews, focus groups, surveys, and/or questionnaires. Applications that propose to collect pre-clinical or clinical trial data as part of the R34 will be non-responsive and will be withdrawn prior to review.

Scope of the R34 Planning Grant

The range of activities proposed in the R34 planning grant will depend on state of development of the trial as well as the type and complexity of the trial being planned. As described above, the collection or evaluation of pre-clinical or clinical data is not allowed under this R34. Only model recruitment, which is testing the feasibility of recruitment strategies with human subjects to further refine or adjust recruitment methods is acceptable. Activities supported by the R34 planning grant include, but are not limited to, the following examples:

- Develop a clinical study protocol adhering to International Conference on Harmonisation (ICH) E6 Good Clinical Practice Consolidated Guidance
- Develop a manual of operating procedures (MOP) using the NIAMS guidelines which include a detailed description of study procedures and process details, validation, and quality control for any non-standard clinical or laboratory/mechanistic testing which will be performed in the trial
- Develop a preliminary data and safety monitoring plan (DSMP) using the NIAMS guidelines to address how risk to subjects in the clinical trial will be minimized and the process for collecting and reporting of adverse events to the appropriate regulatory bodies
- Develop intervention documents which may include an investigator's brochure or an intervention monitoring manual
- Develop a Clinical Monitoring and Data Management Plan (see description in section 5.1 of NIAMS U01 FOA here)
- Initiate the IRB approval process; for a multi-site trial, begin process for single-IRB
- Develop consent form(s) and, if applicable, assent form(s)
- Develop a recruitment and retention plan which incorporates the NIH Inclusion of Women and Minorities as Participants in Clinical Research and the NIH Policy and Guidelines on the Inclusion of Individuals Across the Lifespan
- Conduct "model recruitment" (as described above) to test recruitment feasibility
- Develop a statistical analysis plan (SAP)
- Identify collaborators and clinical site(s), which may include negotiating sub-contract
- Develop training materials and training/certification plans for study staff who will carry out the study
- Develop a plan for the acquisition and administration of study agent(s)
- Negotiate agreements with industry or other partners to provide drugs, devices, or other resources for trial implementation
- Develop a complete set of suitable documents for submission to the appropriate regulatory authorities such as the

FDA (i.e., Investigational New Drug [IND] application or IND exemption, or Investigational Device Exemption [IDE] application)

- Develop a preliminary timeline and budget for conduct and completion of the future clinical trial including funding for orderly close-out of clinical sites and preparation of a final study report
- Develop a detailed project timeline for submission of the U01 clinical trial

Applicants can request up to two years of funding, but the expectation is that most will only need one. In the event of an award, the NIAMS and the PD/PI will agree on a list of milestones to be completed during the R34 project period which are derived from the specific activities that need to be completed before an implementation trial can be initiated. The submission of the application for the U01 may be one of the milestones and may precede the end of the R34. The milestones will be incorporated into the notice of grant award (NoA).

Link to Additional Information: <https://grants.nih.gov/grants/guide/pa-files/PAR-22-205.html>

8. Collaborative Research, NEH

Application Deadline:

- **Optional Draft: September 15, 2022**
- **Full Proposal: November 30, 2022**

Award Budget:

- **Planning International Collaboration: up to \$25,000 for six to twelve months**
- **Convening: up to \$50,000 for up to one year**
- **Manuscript Preparation: up to \$250,000 for one to three years**
- **Scholarly Digital Projects: up to \$250,000 for one to three years**

The Collaborative Research program aims to advance humanistic knowledge through collaboration between two or more scholars. The program encourages projects that propose diverse approaches to topics, incorporate multiple points of view, explore new avenues of inquiry in the humanities, and lead to manuscripts for print publication or to scholarly digital products. You may propose a research project in a single field of study or interdisciplinary work. NEH encourages collaboration with scholars working in the natural or social sciences, but projects must focus on humanistic content and employ humanistic methods. Collaborations among different types of institutions are welcome. For example, research universities might partner with teaching colleges, libraries, museums, or independent research institutions. NEH encourages applications from Hispanic-Serving Institutions, Historically Black Colleges and Universities, and Tribal Colleges and Universities.

You must propose tangible and sustainable outcomes as the end goal of the project, even if completion lies beyond the award's period of performance. Such outcomes may include, but are not limited to, co-authored or multi-authored books; born-digital publications; themed issues of peer-reviewed journals; a series of peer-reviewed articles in academic journals or articles in general audience publications or both; and open-access scholarly digital projects. All project outcomes must address at least one stated humanities research question and convey interpretive humanities work. You must present a plan to disseminate the project's results.

Funding categories:

- **Planning International Collaboration** - supports initial meetings to brainstorm, plan, and establish new scholarly collaborations. This category is for early-stage projects involving collaborators based in the U.S. and in one or more foreign countries. Scholars at U.S. institutions must contribute significantly to the project. Examples of funded activities include, but are not limited to, research time to correspond and exchange ideas through videoconferencing; joint travel for collaborators to a relevant site, archive, library, or collection to investigate a project's feasibility; exploratory workshops or working group meetings for collaborators; and writing time to complete a plan for future research and publication. Primary products for Planning International Collaboration awards include, but are not limited to, a written plan for collaborative research activities and future print publications or digital scholarly projects; livestreamed or recorded video of workshops; web-posted papers; and podcasts, blogs, and discussion boards.

- **Convening** - supports a single scholarly conference, symposium, or seminar that is open to members of an intellectual community broader than the invited attendees, or up to two working group meetings that advance a single project and may be restricted to primary collaborators. If you propose working group meetings of primary collaborators alone, you must explain why this is necessary. Convening projects should gather participants, virtually or inperson, to sharpen an already established collaborative research topic and work towards subsequent print publications or scholarly digital projects. NEH expects you to advertise convenings appropriately and include a variety of scholars representing diverse points of view. Typical funding requests include, but are not limited to, compensation for the organizing scholar(s); travel, per diem, accommodation, and honoraria for presenters; and costs related to the rental of a venue or audio-visual services. Attendance at the convening must be free of charge. Primary products for Convening awards include, but are not limited to, livestreamed or recorded video of the event; web-posted papers; preparation of conference papers for subsequent edited volumes or peer-reviewed articles; and podcasts, blogs, and discussion boards.
- **Manuscript Preparation** - supports the completion of collaborative manuscripts in preparation for print publication. Examples include, but are not limited to, co- or multiauthored monographs and edited volumes; a series of peer-reviewed articles; and themed issues of peer-reviewed journals. Typical funding requests include, but are not limited to, compensation for research and writing time; joint travel for collaborators to a relevant site, archive, library, or collection to conduct research; and compensation for consultants. The Manuscript Preparation category does not support travel or venue costs for a conference, symposium, or seminar. You should submit the manuscript to a publisher at the end of the period of performance. NEH encourages publication that enables broad public access, insofar as the condition of the materials and intellectual property rights allow.
- **Scholarly Digital Projects** - supports the preparation of born-digital scholarly publications, resources, or tools designed to address explicitly stated humanities research questions. The digital project must include significant, integral humanities interpretation or advance an argument. The project must serve an intellectual community beyond the collaborators. Proposals may involve one or more lead scholars collaborating with digital humanities specialists, librarians, or archivists to prepare a digital publication or project using preexisting platforms, programs, or other technological infrastructure. Scholarly resources and tools may include, but are not limited to, open-access databases with interpretive content, GIS mapping projects, and content-rich websites. Typical funding requests include, but are not limited to, compensation for time to conduct research, write content, and design and build the digital project; joint travel for collaborators to a relevant site, archive, library, or collection to conduct research; and compensation for consultants. This category does not support travel or venue costs for a conference, symposium, or seminar. Applications in this category must present a long-term sustainability plan and discuss options for peer review. NEH encourages you to pursue broad public access to the project, insofar as intellectual property rights allow.

Link to Additional Information: <https://www.neh.gov/grants/research/collaborative-research-grants>

9. Advancing Informal STEM Learning (AISL), NSF

Application Deadline: January 11, 2023

Award Budget:

- **Synthesis projects: \$100,000 to \$500,000 with a duration up to two years**
- **Conference projects: \$75,000 to \$250,000 with a duration up to two years**
- **Partnership Development and Planning projects: \$50,000 to \$150,000 with a duration of one to one and one-half years**
- **Integrating Research and Practice projects: \$250,000 to \$2,000,000 with a duration of two to five years**
- **Research in Support of Wide-reaching Public Engagement with STEM projects: \$1,000,000 to \$3,500,000 with a duration of two to five years**

This program seeks proposals that center equity and belonging, and further the well-being of individuals and communities who have historically been and continue to be excluded, under-served, or underrepresented, due to gender, race, ethnicity,

sexual orientation, disability status, neurodiversity, geographic location, and economic status, among others, as well as their intersections. The current solicitation encourages proposals from institutions and organizations that serve public audiences, and specifically focus on public engagement with and understanding of STEM, including community STEM; public participation in scientific research (PPSR); science communication; intergenerational STEM engagement; and STEM media.

Projects funded by AISL should contribute to research and practice that further illuminates informal STEM learning's role in equity and belonging in STEM; personal and educational success in STEM; advancing public engagement in scientific discovery; fostering interest in STEM careers; creating and enhancing the theoretical and empirical foundations for effective informal STEM learning; improving community vibrancy; and/or enhancing science communication and the public's engagement in and understanding of STEM and STEM processes.

The AISL Program funds five types of projects:

1. Synthesis
2. Conference
3. Partnership Development and Planning
4. Integrating Research and Practice
5. Research in Support of Wide-reaching Public Engagement with STEM

Link to Additional Information: <https://www.nsf.gov/pubs/2022/nsf22626/nsf22626.htm>

10. Scholarly Editions and Scholarly Translations, NEH

Application Deadline:

- **Optional Draft: September 23, 2022; September 23, 2023**
- **Full Proposal: November 30, 2022; November 29, 2023**

Award Budget: up to \$450,000 for one to three years

The Scholarly Editions and Scholarly Translations program provides grants to organizations to support collaborative teams who are editing, annotating, and translating foundational humanities texts that are vital to scholarship but are currently inaccessible or only available in inadequate editions or translations. Typically, the texts are significant literary, philosophical, and historical materials, but works in other humanities fields may also be the subject of an edition.

The program supports continuous full-time or part-time activities during the period of performance of one to three years. At least two scholars must work collaboratively on the project. Typical project expenses include salary for editorial and research activities, travel to collections to verify source material, and consultant fees for translation, editorial work, and the implementation of a digital edition.

In addition to supporting editorial projects at an implementation stage, the program also encourages applications for up to two-year projects at a planning stage that are determining the scope of the corpus, collecting documents, establishing the editorial and translation policies, evaluating the target audiences and determining their needs, selecting collaborators, and planning for dissemination and digital sustainability.

You may submit proposals for editions in the original language (English or non-English) or the translation of non-English language texts into English, but not for translations of texts into any language other than English.

You may disseminate edited materials in print or digital formats, or a combination of both. If you receive an award, NEH expects you to provide broad access to all products, insofar as the condition of the materials and intellectual property rights allow. NEH strongly encourages projects that offer free public access to digital materials (see Providing access to NEH-funded products). NEH encourages applications from minority-serving institutions, such as Historically Black Colleges and Universities, Hispanic-Serving Institutions, and Tribal Colleges and Universities.

Link to Additional Information: <https://www.neh.gov/grants/research/scholarly-editions-andtranslations-grants>

11. Laboratory of Developmental Biology (R24 Clinical Trial Not Allowed), NIH

Application Deadline:

- Letter of Intent: October 2, 2022
- Full Proposal: November 2, 2022

Award Budget: limited to \$800,000 direct costs per year for a maximum project period of 5 years

The purpose of this opportunity is to provide support for a resource that supports projects which enhance the capabilities of ongoing basic, translational, and clinical research in the field of human developmental biology. The resource collects, prepares, and distributes conceptual tissues and its derivatives to the scientific community. This resource has served the scientific community for the past 56 years, and the resource needs to be sustained as it has a vast repository of conceptual tissues and its derivatives, different types of cells, RNA, DNA and proteins. Moreover, it facilitates access to otherwise difficult to obtain fetal tissues for biomedical research, while adhering to the highest ethical and regulatory standards. The resource works synergistically with recipients to design and execute high-impact collaborative projects. Over the last few years, the tissues supplied by this repository have been instrumental for major projects such as ENCODE, Roadmap Epigenomics, BrainSpan Atlas of the Developing Human Brain, and multiple NIH-funded individual projects. A single, centralized resource ensures that the material is collected and processed appropriately and consistently. This PAR (A Program Announcement with special receipt, referral and/or review) is developed for the resource to be re-competed.

The main objectives of this resource are the systematic collection, staging, identification, and processing of normal and abnormal specimens and the distribution of these tissues and its derivatives to qualified recipients, such as NIH-funded investigators and biomedical scientists at academic and non-profit research institutions. The resource facility should have the ability to process tissues using specific, investigator-provided protocols to meet the needs of the requestors as well as have established protocols for storage of specimens at the laboratory if necessary. These latter samples will provide a repository that will also be available to investigators in the biomedical research community.

The resource facility must be established and have a track record of positive interactions with the community and be willing to work with key investigators to improve services as required.

In addition to the main objectives of staging, identifying, and processing of normal and abnormal specimens, the applicant may propose the development of new approaches for improving these processes, such as the use of imaging techniques [e.g. micro-CT scanning, optical projection tomography, etc.] genomic analyses and immuno-staining procedures. The applicant may also propose additional services such as (but not limited to) making available samples for DNA/RNA extraction and epigenetic studies, generating copy number variant data, exploiting imaging techniques for virtual histological and phenotyping capabilities.

Extend the biomedical research resource further by:

- Enhancing the diversity of collection through engagement and outreach to facilities in underrepresented populations
- making available samples for DNA/RNA extraction and epigenetic assays
- extending the systematic collection, identification, and distribution to abnormal conceptual tissues
- continuing to develop and evaluate the utility of novel tissue imaging systems to enhance laboratory services
- using the virtual histological and phenotyping capabilities of tissue imaging platforms
- utilizing the expected enrichment of genetic defects underlying fetal congenital anomalies by generating copy number variant data through array-based comparative genomic hybridization studies
- engaging and working with key collaborators to improve services and increase the number of recipient investigators

Link to Additional Information: <https://grants.nih.gov/grants/guide/pa-files/PAR-22-229.html>

12. Digital Humanities Advancement Grants, NEH

Application Deadline:

- **Optional Draft:** November 14, 2022; April 17, 2023
- **Full Proposal:** January 12, 2023; June 15, 2023

Award Budget:

- **Level I:** up to \$75,000 for up to 24 months
- **Level II:** \$75,001 to \$150,000 for up to 24 months
- **Level III:** \$150,001 to \$350,000 for up to 36 months

This notice solicits applications for the Digital Humanities Advancement Grants (DHAG) program from the Office of Digital Humanities. The DHAG program supports projects at different phases of their lifecycles that respond to one or more of these programmatic priorities:

- research and refinement of innovative, experimental, or computationally challenging methods and techniques
- enhancement or design of digital infrastructure that contributes to and supports the humanities, such as open-source code, tools, or platforms
- evaluative studies that investigate the practices and the impact of digital scholarship on research, pedagogy, scholarly communication, and public engagement

The DHAG program values experimentation, reuse, and extensibility, leading to work that can scale to enhance scholarly research, teaching, and public programs in the humanities. DHAG recipients contribute to humanities scholarship by serving carefully identified audiences, addressing issues of accessibility and usability, and designing equitable, open, replicable, and sustainable projects. If your project is funded, you must analyze your workflow and publish your results in a white paper that NEH will share widely. This body of work contributes to the digital humanities' research base.

Funding levels:

- **Level I** - support small research projects or early stages of larger projects, including activities such as:
 - developing a research agenda or strategy
 - identifying appropriate methods or technologies for new and existing digital humanities projects
 - convening planning sessions with stakeholders or conducting audience research to determine user needs and priorities
 - designing experimental alpha-level prototypes
 - facilitating convenings to address field-wide questions
 - planning to revitalize and/or recover an existing digital project

Outcomes for Level I projects may include:

- reports and position papers (especially for projects involving evaluative studies)
- new consortia or partnerships
- plans for future research and technical development, design documents, and/or data integration
- articles, essays, books, edited volumes, or reports
- testing and assessment reports from alpha-level prototypes

- **Level II** - support projects that have completed an initial planning phase and are poised to scale up based on prior research and development with a well-defined work plan, including activities such as:
 - technical development and/or user experience design for beta-stage prototypes of opensource tools or software
 - data curation
 - meetings with advisory board members or collaborators
 - evaluation and refinement of the project's methods, workflows, or tools to teach humanities concepts or to support humanities research
 - development of virtual/in-person workshops or tutorials to disseminate project results

Outcomes for Level II projects may include:

- release of add-ons, code libraries, or working prototypes of tools
- implementation of new workflows through humanities-based case studies
- training data or models

- workshops, online tutorials, and other forms of documentation
- publications or conference presentations to share project results
- **Level III** - support the expansion of mature projects with an established user base and strong dissemination plans beyond the applicant institution. If you apply to Level III, you must complete a planning or prototyping phase prior to applying and you must demonstrate prior success. Earlier phases of the project's development may or may not have been supported by NEH or other funders. Level III awards support activities such as:
 - technical and user experience design, including transformation of a prototype into a usable resource
 - testing with targeted user communities
 - code review and bug fixing
 - development of training materials and documentation to promote wide use of the project
 - preparation of presentations and publications to disseminate project results
 - preparation of data, software, or websites for future preservation
 - accessibility compliance review

Outcomes for Level III projects may include:

- launch of the digital project
- public release of final software, code, or datasets
- publication and presentation of research and results
- community engagement and outreach events, including workshops
- documentation and tutorials in multiple formats
- implementation of data management and sustainability plans

Pre-Application Webinar: NEH will post a pre-recorded webinar to the program resource page by October 27, 2022.

Link to Additional Information: <https://grants.nih.gov/grants/guide/pa-files/PA-20-070.html>

13. Research Infrastructure Development for Interdisciplinary Aging Studies (R21/R33 - Clinical Trial Optional), NIH

Application Deadline: February 16, 2023; June 16, 2023

Award Budget:

- **R21 phase: the combined budget for direct costs for a two-year project period may not exceed \$275,000. No more than \$200,000 may be requested in any single year.**
- **R33 phase: application budgets must remain under \$500,000 in annual direct costs.**

This FOA invites applications that propose to develop novel research infrastructure that will advance the science of aging in specific areas requiring interdisciplinary partnerships or collaborations. This FOA will use the NIH Phased Innovation Award (R21/R33) mechanism to provide up to 2 years of R21 support for initial developmental activities and up to 3 years of R33 support for expanded activities. Through this award, investigators will develop a sustainable research infrastructure to support projects that address key interdisciplinary aging research questions.

Scope

Applications submitted to this FOA should propose development of research infrastructure to advance specific topics in aging science that require interdisciplinary partnerships or collaborations. The range of disciplines included in the application should be appropriate to the scientific goals of the proposed collaboration.

This FOA is intended to support establishment of new interdisciplinary collaborations or development of existing interdisciplinary collaborations in significantly new directions. For existing collaborations, reviewers will evaluate closely whether the application represents a substantial development in scientific focus as opposed to simply maintaining existing operations.

Prospective applicants are strongly encouraged to contact the Scientific/Research Contact before preparing an application to ensure that their applications are consistent with NIA program priorities, budgetary limits, and the goals of this FOA.

NIA is interested in applications in the following topic areas:

1. Division of Aging Biology (DAB)
2. Division of Behavioral and Social Research (BSR)
3. Division of Geriatrics and Clinical Gerontology (DGCG)
4. Division of Neuroscience (DN)

Link to Additional Information: <https://grants.nih.gov/grants/guide/pa-files/PAR-20-070.html>

14. Cancer Tissue Engineering Collaborative: Enabling Biomimetic Tissue-Engineered Technologies for Cancer Research (R01 Clinical Trial Optional), NIH

Application Due Dates:

- Letter of Intent: 30 days prior to the application due date
- Full Proposal: October 5, 2022; February 5, 2023

Award Budget: limited to \$400,000 direct costs per year for a maximum period of 5 years

The purpose of the program is to encourage investigator-initiated research efforts aimed at the development, characterization and implementation of state-of-the-art biomimetic tissue-engineered technologies for cancer research as well as cancer diagnosis, treatment, and prevention strategies. Tissue-engineered in vitro and ex vivo systems that reflect the pathology and physiology of human disease are needed within the existing continuum of cancer models as new tools for understanding cancer biology. Investigators are highly encouraged to apply such tools to improve early detection, diagnosis, early prognosis of preneoplastic and neoplastic lesions which will ultimately lead to advances in cancer prevention, and treatment. To date, only a few validated, biologically relevant tissue-engineered technologies exist for addressing specific cancer research questions. Recent technological advances in biomimetic tissue-engineered systems for the purposes of regenerative medicine could allow for new, innovative applications to cancer research.

This opportunity will support:

- multidisciplinary research projects, and the funded investigators will collectively participate in the Cancer Tissue Engineering Collaborative (TEC) Research Program. Funded investigators will also be invited to attend meetings associated with the NCI Physical Sciences-Oncology Network (PS-ON). The Cancer TEC research projects will focus on the development and characterization of in vitro systems using tissue-engineered technologies that mimic tumor biology to elucidate specific cancer phenomena that are otherwise difficult to examine in vivo and test a specific hypothesis.
- development, characterization, and application of state-of-the-art biomimetic tissue-engineered technologies for cancer research. Critical to this opportunity will be characterizing the biological relevance of the tissue-engineered technologies in a cancer-relevant context of use. Applicants will be expected to take a novel engineering approach to define the critical features and parameters for the proposed system, how they are sufficient to mimic the physiology and pathology of the specific cancer question under study, and what characterization will be needed to validate the biological relevance of the system. Characterization could include the demonstration of relevant tissue structure, tumor biology, pathology, and physiological function that replicate the aspect of tumor biology that will be studied using the proposed system. These technologies should begin to have novel applications addressing questions in cancer biology, prevention, early detection of aggressive cancer, diagnosis and therapy.

This opportunity encourages collaborative, multidisciplinary projects that engage the fields of cancer research with regenerative medicine, tissue engineering, biomaterials, and bioengineering. It is also expected to advance innovative, well characterized in vitro and ex vivo systems available for cancer research, expand the breadth of these systems to several cancer types, and promote the exploration of cancer phenomena with biomimetic tissue-engineered systems. Applicants are encouraged to leverage existing resources, such as in vivo models, imaging techniques, or computational models.

Link to Additional Information: <https://grants.nih.gov/grants/guide/pa-files/PAR-22-099.html>

15. National Cancer Institute's Investigator-Initiated Early Phase Clinical Trials for Cancer Treatment and Diagnosis (R01 Clinical Trial Required), NIH

Application Due Dates:

- **Letter of Intent: 30 days prior to the application due date**
- **Full Proposal: February 5, 2023; June 5, 2023**

Award Budget: limited to \$499,999 direct costs per year for a maximum period of 5 years

The purpose is to support research projects that include and implement early phase (Phase 0, I, and II) investigator-initiated clinical trials on cancer-targeted diagnostic and therapeutic interventions of direct relevance to the research mission of the NCI's DCTD and OHAM. All applications should address the mission and priorities of one or more of the following programs:

1. Cancer Therapy Evaluation Program (CTEP, DCTD)
2. Cancer Imaging Program (CIP, DCTD)
3. Cancer Diagnosis Program (CDP, DCTD)
4. Radiation Research Program (RRP, DCTD)
5. Office of Complementary and Alternative Medicine (OCCAM, DCTD)
6. Office of HIV and AIDS Malignancies (OHAM, Office of the Director)

Applications submitted to this FOA must meet the NIH definition of a clinical trial (see NOT-OD-15-015) and provide specific clinical trial information as described in this FOA and the NIH application FORMS-F guidelines (See: <https://grants.nih.gov/grants/guide/notice-files/NOT-OD-20-026.html>).

Research Objectives

This opportunity is applicable to a broad range of clinical trial evaluations designed to improve the diagnosis and treatment of cancer in areas of common and unmet need. Each application should represent the applicant's or applicants' interest(s) and competencies, as well as the science related to diagnosis and treatment of cancer patients through well-designed and executed clinical trials. In addition, strategies to assess feasibility can include a novel area of investigation, new experimental systems, and/or existing technologies in a new area.

Although the rationale must be supported by preliminary data, the proposed clinical investigations may include study designs, methods, and interventions that are not themselves innovative but address important questions and/or unmet needs.

Link to Additional Information: <https://grants.nih.gov/grants/guide/pa-files/PAR-21-033.html>

16. NHLBI Program Project Applications (P01 Clinical Trial Optional), NIH

Application Due Date:

- **Letter of Intent: 60 days prior to the application due date**
- **Full Proposals: January 25, 2023; May 25, 2023**

Anticipated Funding Amount:

- **Regular: \$1,515,000 in direct costs in each year for a maximum of 5 years**
- **ESI-led: If an ESI-led Project is included and the application contains a minimum of four Projects, applications must limit their budget to \$1,765,000 in direct costs (excluding first-tier subcontract [F&A] costs) in each year (with a minimum of \$250,000 per year in direct costs for the ESI-led Project).**
- **Applicants should discuss the budget with NHLBI staff early in the planning phase.**

This opportunity requires a minimum of three interrelated research projects that investigate a complex biomedical theme or research question. The projects may be supported by scientific cores, if justified, to facilitate economy of effort, space, and equipment. The NHLBI provides support for Program Project Grants (PPGs) in the belief that collaborative research efforts can accelerate the acquisition of knowledge more effectively than a simple aggregate of research projects that have no interaction or thematic integration.

NHLBI is particularly interested in encouraging new scientific directions in PPGs. Use of the P01 mechanism is viewed as an opportunity to attract and include scientists who traditionally have not been supported by the NHLBI. Further, the PPG environment presents an opportunity for emerging scientific leaders to gain insight into how to lead a successful scientific program, and applicants will have the opportunity to include a project led by an Early Stage Investigator (ESI). All projects in the Program must be interrelated and have objectives that address a central theme within the scientific mandate of the NHLBI.

Research Objectives

The purpose of the Program Project approach is to support integrated, collaborative research programs that have a well-defined, central research focus or objective. Applications must include a minimum of three individual research projects that contribute to the Program objective. Since the NHLBI is interested in supporting new, innovative research through the Program Project, no more than half of the Projects included in a funded Program Project Grant application may include Projects that significantly overlap in time and objectives with currently funded individual research project grants, i.e., individual research project grants that would have to be relinquished if the Program Project application is funded. Each individual research Project should reflect a distinct, separate, scientifically meritorious research effort led by an independent investigator, the Project Leader. In addition, the individual Projects should be clearly interrelated and synergistic so that the research ideas, efforts, and outcomes of the Program as a whole will offer a distinct advantage over pursuing the individual projects separately. As part of this integration, the PD/PI (or each of the Multiple PD(s)/PI(s)) will also serve as the Project Leader of one of the Projects and each awarded Program Project will have a minimum of three distinct/individual Project Leaders.

Link to Additional Information: <https://grants.nih.gov/grants/guide/pa-files/PAR-21-088.html>

17. Alcohol Health Services Research (R01 Clinical Trial Optional), NIH

Application Due Date:

- Letter of Intent: 30 days prior to the application due date
- Full Proposal: October 5, 2022; February 5, 2023

Anticipated Funding Amount: budgets are not limited but need to reflect the actual needs of the proposed project

This opportunity will broadly focus on closing the treatment gap for individuals with alcohol use disorder (AUD); within this focus, there are five major areas of emphasis: (1) increasing access to treatment for AUD, (2) making treatment for AUD more appealing, (3) examining cost structures and insurance systems, (4) conducting studies on dissemination and implementation of existing evidence-based approaches to treating AUD, and (5) reducing health disparities as a means of addressing the treatment gap in AUD for health disparity population.

Research Objectives

This opportunity focus on how research in alcohol health services can address the treatment gap for individuals with AUD who do not receive formal treatment from which they may benefit. Alcohol health services range across the continuum of care, from prevention to screening to intervention to recovery maintenance, and across the lifespan, targeting those individuals at all stages of life. In addition, alcohol health services research should consider barriers to care relevant for health disparity populations as defined by the NIH, which include racial and ethnic minority, sexual and gender minority, socioeconomically disadvantaged, and underserved rural populations.

Broadly, this FOA seeks to advance five main areas in alcohol health services research: accessibility, increased treatment appeal, costs, dissemination and implementation, and health disparities. We are particularly interested in applications addressing the interaction between one or more of these five areas and those using study designs extending beyond standard randomized clinical trials, e.g., hybrid effectiveness-implementation, Sequential Multiple Assignment Randomized Trial (SMART), and multiphase optimization study (MOST). Specific areas of interest include but are not limited to:

- Identification of specific barriers to accessing treatment

- Development and implementation of strategies to reduce barriers to treatment access
- Integration of AUD treatment into healthcare settings not specific to addiction, e.g., primary care, emergency departments, etc.
- Effectiveness of integrated behavioral health approaches, e.g., Collaborative Care Model, Patient Centered Medical Homes, etc.
- Implementation and sustainability of telemedicine for alcohol health services
- Costs associated with integrating alcohol treatment services into routine healthcare
- Workforce-related factors relevant for access, implementation, and sustainability of evidence-based treatment
- Geographic differences in alcohol control and related policies and their impact on alcohol health services
- Dissemination, implementation, and sustainability of evidence-based interventions for AUD
- Measures to assess the multiple components and dimensions of individual health disparities models (e.g., health literacy, access to health care, confidence in the proximal health system, socioeconomic status, sociocultural beliefs and practices related to alcohol use, and personal health care)
- Stigma, particularly as related to health disparity populations
- Development and adaptation of culturally-grounded interventions to address particular barriers to health services for AUD

The Office of Research on Women’s Health (ORWH) encourages research that considers the influence of sex and/or gender on health and disease focusing on the impact of diseases and the health of women across the lifespan as outlined in the Trans-NIH Strategic Plan for the Health of Women (<https://www.nih.gov/women/strategicplan>). ORWH is interested in supporting research that addresses the influence of sex and/or gender on treatment of alcohol use disorder (AUD) for girls and women across their life course. Projects focused on groups of women and girls who are understudied, underrepresented, and underreported in research, exploring sex and gender differences, considering intersectionality and multidimensional frameworks, and intervening across multiple levels in partnership with diverse stakeholders are highly encouraged. This would include research which examines models of care coordination and sociocultural practices which can mitigate the impact of alcohol use disorder for girls and women across diverse settings of care.

Link to Additional Information: <https://grants.nih.gov/grants/guide/pa-files/PAR-22-156.html>

18. Mechanisms of Alcohol Tolerance (R21/R33 Clinical Trial Optional), NIH

Application Deadline: October 16, 2022; February 16, 2023

Award Budget:

- **R21 Phase: combined budget for direct costs during the two-year project period may not exceed \$275,000 with no more than \$200,000 requested in a single year, for a period of 2 years**
- **R33 Phase: direct costs should not exceed \$500,000 per year, for a period of 3 years**

This opportunity encourages studies that identify the mechanisms of sensitivity and tolerance in AUD in relation to other variables (e. g. sex, behavioral context, age) through an R21/R33 mechanism. The R21 phase is the first two (2) years of the application, while the R33 spans the following three (3) years.

The R21 phase supports re-analysis of data from human experimental paradigms leading to AUD, with the goal of developing new hypotheses and common experimental framework(s) to characterize the sensitivity and tolerance (including individual variations). While tolerance may not have been the goal of the previous research, measurements of blood alcohol concentrations, in addition to the behavioral or physiological measurements, may provide insight into the mechanisms of tolerance. Re-analysis of these data and new pilot studies, through the lens of understanding sensitivity and tolerance, have the potential to provide preliminary data to develop and test new hypotheses about the roles of sensitivity and tolerance in AUDs in the R33 phase. Topics include, but are not limited to, the following:

- Studies that determine the effects of sex, age, race/ethnicity, environmental context, metabolites, and dose on the response (sensitivity) to alcohol
- Studies that define common parameters leading to the acquisition of chronic tolerance, including factors that define response heterogeneity (genetics, epigenetic modifications, biomarkers (including metabolites), sex,

race/ethnicity, and age)

- Studies that define overall exposure regimen (i.e. oral, intravenous, low dose, voluntary choice, binge drinking, self-administration, and periods of abstinence) and the effects of prediction and control (learning mechanisms) in alcohol tolerance, persistence, and extinction
- Development and testing of quantitative models describing the relationship between sensitivity and tolerance, defining relationships between acute, rapid, and chronic tolerance, and identify common and distinct mechanisms of sensitivity and forms of tolerance
- Examination of behavioral responses and neural circuitry following repeated periods of tolerance and abstinence and relationship to AUD and relapse
- Studies of adaptation of neural circuits of behavioral, emotional, and cognitive measures during acquisition and loss of tolerance, including molecular and cellular changes. The identification of adaptations leading to the allostatic state within a neural circuit or across neural circuits due to tolerance is of high programmatic priority
- Interactions of neural circuitry of the physiological responses of tolerance and the neural circuitry of AUD and relapse, including methods of electrophysiology and functional magnetic resonance imaging
- Studies that utilize state-of-the-art multi-omics approaches in humans to identify and validate molecular signaling, cellular and extracellular interactions, and epigenetic mechanisms, underlying sensitivity and tolerance to alcohol
- Studies that examine the interactions of metabolic and functional forms of tolerance, with special consideration to molecules involved in alcohol metabolism that are expressed in the brain

Link to Additional Information: <https://grants.nih.gov/grants/guide/pa-files/PAR-21-250.html>

19. Advanced Development of Informatics Technologies for Cancer Research and Management (U24 Clinical Trial Optional), NIH

Application Deadline:

- **Letter of Intent: 30 days prior to the application due date**
- **Full Proposal: November 17, 2022**

Award Budget: \$600,000 direct costs for up to one year, for a maximum of five years

The purpose is to invite Cooperative Agreement (U24) applications for advanced development and enhancement of emerging informatics technologies for cancer research. As a component of the NCI's Informatics Technology for Cancer Research (ITCR) Program, this FOA focuses on emerging informatics technology, defined as one that has passed the initial prototyping and pilot development stage, has demonstrated potential to have a significant and broader impact, has compelling reasons for further improvement and enhancement, and has not been widely adopted in the cancer research field. To be successful, proposed development plans must have a clear rationale on why the proposed technology is needed and how it will benefit the cancer research field. In addition, mechanisms to solicit feedback from users and collaborators throughout the development process must be included.

The ITCR Program

The central mission is to promote research-driven informatics technology across the development lifecycle to address priority needs in cancer research. The program supports the development of critical tools and resources to improve the acquisition, analysis, visualization, and interpretation of data across the cancer research continuum including cancer biology, cancer treatment and diagnosis, early cancer detection, risk assessment and prevention, cancer control and epidemiology, and cancer health disparities.

ITCR provides support for informatics technology development through four FOAs aimed at distinct phases of the technology development lifecycle:

- RFA-CA-22-021 (R21, Clinical Trial Optional) supports the development of highly innovative informatics methods and algorithms
- RFA-CA-22-022 (U01, Clinical Trial Optional) supports initial tool development or the significant modification of existing tools for new applications
- RFA-CA-22-023 (this FOA, U24, Clinical Trial Optional) supports the continued development of emerging

informatics technology that has passed the initial prototyping and pilot development stage, has demonstrated potential to have a significant and broader impact, has compelling reasons for further improvement and enhancement

- RFA-CA-22-024 (U24, Clinical Trial Optional) supports sustaining operations and improving the user experience and availability of existing, widely-adopted informatics tools and resources.

Specific Research Objectives and Scope

This FOA encourages applications that involve the advanced development and enhancement of emerging, user-friendly informatics technologies that support a wide range of cancer research, including discovery biology, population studies, as well as clinical and translational research. The emphasis will be on uniqueness and potential impact on cancer research. In addition, all projects proposed in response to this FOA must involve the following general attributes:

- Potential to advance the collaborating research projects and the cancer research field in general.
- Offers clear advantages over competing technologies in the targeted cancer research domain.
- Provides compelling plans and processes for supporting and engaging end users to evaluate and apply the tool or resource.
- Provides a realistic timeline and milestones for technology development.

Awardees will be expected to participate in additional collaborative research activities identified post-award, to enhance the utility and/or interoperability of the informatics technology being supported through the award. These expansion activities are intended to further the impact of the technology that is the subject of the award and may include collaborations with other ITCR awardees or with investigators outside of ITCR. Proposals for these expanded collaborative activities will be evaluated by processes established by the ITCR Steering Committee.

Examples include, but are not limited to:

- Extension or adaptation of a tool to support the needs of a cancer research project.
- Implementation of common Application Programming Interfaces (APIs) to support data exchange among tools.
- Use of a common software platform/interoperability infrastructure for tool integration.

Link to Additional Information: <https://grants.nih.gov/grants/guide/rfa-files/RFA-CA-22-023.html>

20. Administrative Supplements for Research on Women's Health in the IDeA States, NIGMS

Application Deadline: October 17, 2022; October 17, 2023

Award Budget: up to \$200,000 in direct costs exclusive of Facilities and Administrative costs on sub-contracts for a one-year program

The Office of Research on Women's Health (ORWH) and the National Institute of General Medical Sciences (NIGMS), along with the other participating NIH Institutes, Centers, and Offices (ICOs) announce the availability of administrative supplements to IDeA awards to expand research and research capacity in the IDeA states to address important issues of women's health across the lifespan. The proposed research must be within the scope of the parent grant and must address at least one of the strategic goals of the 2019-2023 Trans-NIH Strategic Plan for Women's Health Research "Advancing Science for the Health of Women."

Institute, Center, and Office (ICO)-Specific Research Interests:

- National Cancer Institute (NCI) - is interested in supporting research on cancer causes, prevention, and treatment that addresses important issues of women's health. (See full announcement for areas of interest.)
- National Center for Complementary and Integrative Health (NCCIH) - is interested in research investigating complementary and integrative health approaches to improve maternal health outcomes. Natural products include botanicals, probiotics/microbials, naturally-derived peptides, dietary supplements, and special diets. Mind-body approaches include various meditation approaches (e.g., mindfulness), hypnosis or guided imagery, meditative

movement approaches (e.g., yoga, tai chi, qi-gong), body-based approaches (e.g., spinal manipulation, massage, mobilization, acupuncture), a combination of these approaches (e.g., meditation and yoga, such as in mindfulness-based stress reduction MBSR), or complex interventions including music and art therapy. (See full announcement for areas of interest.)

- National Heart, Lung, and Blood Institute (NHLBI) – supports basic, preclinical, translational, and clinical research that leads to improvement of heart, lung, blood, and sleep (HLBS) health outcomes for women. (See full announcement for areas of interest.)
- National Eye Institute (NEI) - is interested in supporting research in its programmatic areas (<https://www.nei.nih.gov/grants-and-training>) that addresses important issues of women’s health especially those focused on maternal and infant morbidity.
- National Institute on Aging (NIA) - will accept applications for research projects in areas within the Institute's mission, including genetic, biological, behavioral, social, and economic research on aging. In addition, NIA encourages applications on Alzheimer’s disease (AD) and AD-related dementias (ADRD). (See full announcement for areas of interest.)
- National Institute of Biomedical Imaging and Bioengineering (NIBIB) - interests include the development and integration of advanced bioengineering, sensing, imaging, and computational technologies for the improvement of human health and medical care. Only supports projects developing platform technologies that are applicable to a broad spectrum of disorders and diseases.
- National Institute of Child Health and Human Development (NICHD) - seeks supplements addressing important issues in women’s health that are aligned with NICHD scientific priorities. Populations of high priority to NICHD include pregnant and lactating women as well as women of all ages with physical and/or intellectual disabilities. (See full announcement for areas of interest.)
- National Institute on Drug Abuse (NIDA) - seeks to support research advancing women’s health and considering sex and gender as primary and interacting factors in substance use disorder (SUD), its comorbidities and risk states. (See full announcement for areas of interest.)
- National Institute of Dental and Craniofacial Research (NIDCR) - is interested in supporting research in its programmatic areas that address mechanisms underlying the manifestations of sex- and gender-based differences in Dental, Oral, and Craniofacial (DOC)-related diseases and conditions across lifespan. These include but are not limited to oral conditions such as Sjogren’s Disease, temporomandibular joint disorders, orofacial pain, high risk oral Human papillomavirus (HPV) infection and persistence, postmenopausal osteoporosis and periodontitis, oral health disparities and inequities in women.
- National Institute of Environmental Health Sciences (NIEHS) - is interested in supporting research that addresses or seeks to understand how exposures to toxic chemical and non-chemical environmental insults alter biologic processes that may be linked to disease in women, particularly maternal and infant mortality and morbidity. Equally important is research examining women’s health at the intersection of chemical, physical, built, and social environments.
- Division of Program Coordination, Planning and Strategic Initiatives, Office of Disease Prevention (ODP) - is interested in supporting research to reduce maternal and infant morbidity and mortality, encourage the uptake of preventive interventions and services in rural and medically underserved communities, and promote health equity across the lifespan.
- Office of Research on Women's Health (ORWH) - is interested in research that addresses women’s health issues across the lifespan with an emphasis on chronic diseases and comorbidities including but not limited to

cardiovascular diseases, depression, obesity, dementia, endometriosis, intimate partners' violence. In addition, ORWH is interested in research that addresses maternal and infant morbidity and mortality and their underlying causes affecting medically underserved women and living in rural areas. Also, research in digital health, including the use of mobile health apps, telemedicine, and data analytics to improve health systems access and delivery addressing women's health disparities.

Link to Additional Information: <https://grants.nih.gov/grants/guide/notice-files/NOT-GM-22-005.html>

21. HEAL Initiative: Oral Complications Arising from Pharmacotherapies to Treat Opioid Use Disorders (R01 Clinical Trial Not Allowed), NIH

Application Deadline:

- **Letter of Intent: December 16, 2022**
- **Ful Proposal: January 17, 2023**

Award Budget: budgets are not limited but need to reflect the actual needs of the proposed project

The purpose of this Funding Opportunity Announcement (FOA) is to solicit research to better understand the biology, natural history, and directionality of oral complications associated with pharmacotherapies used to treat opioid use disorders (OUDs). Further, this FOA will support research to address access to care and other challenges that may contribute to dental and oral disease onset and progression in people with OUD, with a long-term goal of developing targeted preventive strategies for these individuals.

Scope

This FOA encourages basic science research to understand the local environment of the oral cavity during oral buprenorphine use and elucidate the role of microbial flora and salivary proteins and buffering capacity in contributing to the development and progression of reported oral complications. Drugs dissolved in the mouth that may induce a low pH oral environment and, along with prolonged exposure times to the dentition, may affect the- physical integrity or undermine the natural physiology of the tooth, both directly and indirectly. In the mouth, changes in abundance or function of organisms within the oral microbiome can lead to dysbiosis and subsequent oral disease development after environmental, dietary, or host perturbations. Further, there is an opportunity for pharmacological development, such as drug discovery and repurposing, to identify OUD pharmacotherapeutics that may have less direct impact upon the oral cavity.

In addition, this FOA encourages clinical studies to characterize the directionality, clinical course, and extent of oral disease development and progression in people undergoing OUD treatment, and factors that may predispose people receiving buprenorphine to the development and/or progression of oral complications. It is important to differentiate between de novo oral disease development and progression of pre-existing oral disease in the presence of OUD treatment. Further, a retrospective claims database study suggested that individuals receiving MAT for OUD did not increase dental utilization in the year after beginning MAT. Consequently, there is a need to address behavioral and psychosocial influences upon oral health and access to care challenges in individuals undergoing treatment for OUD. These individuals may have significant oral health and medical needs and encounter multiple levels of contextual influences that affect access to quality and affordable oral health care. Study designs may include cohort studies that provide longitudinal follow-up of individuals initiating treatment for OUD, case-control studies, and retrospective/prospective studies utilizing databases beyond the scope of the companion R21 FOA, RFA-DE-23-016, such as research proposing to combine dental, medical, and pharmacy databases and/or identify study participants and utilize retrospective data through databases and follow those participants prospectively.

Research supported by this FOA may identify best practices and/or interventions to prevent dental, oral, and/or craniofacial disease in individuals receiving pharmacotherapies for OUD and/or tools to educate prescribers and patients being treated with buprenorphine about the potential for oral complications.

Link to Additional Information: <https://grants.nih.gov/grants/guide/rfa-files/RFA-DE-23-015.html>

22. NICHD Global Network for Women's and Children's Health Research: Research Units (UG1 Clinical Trial Optional), NIH

Application Deadline:

- Letter of Intent: 30 days prior to the application due date
- Full Proposal: November 29, 2022

Award Budget: maximum of \$165,000 per year in direct base costs, and up to \$350,000 in direct costs under Other Expenses as restricted funds to be used for multiple protocols approved, including a maternal and neonatal health registry for a maximum period of 7 years.

The purpose of the program is to improve health outcomes for women and children in low- and lower middle-income countries (as defined by the World Bank) by researching sustainable, cost-effective health interventions, and strengthening research infrastructure and public health intervention capabilities in developing countries. The Network will increase opportunities for scientific linkages, interaction, knowledge development and transfer, and collaborative partnerships among U.S. and foreign investigators and institutions.

As such, the Global Network helps the U.S. Government meet the United Nation's Sustainable Development Goals (SDGs) to:

- Reduce the global maternal mortality ratio to less than 70 per 100,000 live births by 2030.
- End preventable deaths of newborns and children under 5 years of age, with all countries aiming to reduce neonatal mortality to at least as low as 12 per 1,000 live births and under-5 mortality to at least as low as 25 per 1,000 live births by 2030.
- Substantially increase health financing and the recruitment, development, training and retention of the health workforce in developing countries, especially in least developed countries and small island developing States.

In addition, the Network can help the U.S. to address ongoing and potential future public health crises that impact the health of pregnant people and/or their infants, such as the COVID epidemic, Zika epidemic, and the opioid crisis.

This Network of research institutions will work collaboratively to implement common protocols. Proposed interventions may focus on the development, testing, adaptation, and implementation of cost-effective, integrated biomedical, behavioral, social, and public health interventions to reduce causes of premature morbidity and mortality among women of reproductive age and young children. Study designs may include, but are not limited to, translational research, implementation science, investigational new drug or device, comparative effectiveness, and management trials, and observational studies. Studies may assess both short-term (clinical) and long-term infant and child outcomes (up to 3 years of age). When relevant and appropriate, NICHD encourages the inclusion of genomic and proteomic studies, sub-studies, and/or collection of related biospecimens for such research. Examples of studies conducted in the Network can be found at: <https://globalnetwork.azurewebsites.net/Research-Studies/Active-Studies>. All Global Network research must be designed such that health improvements in the study population are meaningful, sustainable, culturally appropriate, and likely to produce a measurable and significantly improved health outcome.

The Network may collaborate on studies and projects with other networks and initiatives – such as the NICHD Maternal-Fetal Medicine Units (MFMU) Network, the NICHD Maternal and Pediatric Precision in Therapeutics (MPRINT) Initiative, the NIH Helping to End Addiction Long-term (HEAL) Initiative, the NIH Researching COVID to Enhance Recovery (RECOVER) Initiative, the Foundation for the NIH, and other NIH institutes and Federal agencies, such as the Centers for Disease Control and Prevention.

All institutions participating in the Network will be expected to align with the following goals as a condition of inclusion:

1. Enhancing rigor and reproducibility
2. Promoting greater availability of multisite clinical trial infrastructure to support trials from a wider range of investigators
3. Facilitating data sharing and access to biospecimens
4. Facilitating greater involvement of diverse populations in multisite clinical trials.

Link to Additional Information: <https://grants.nih.gov/grants/guide/rfa-files/RFA-HD-23-008.html>

23. Astronomy and Astrophysics Research Grants (AAG), NSF

Submission Window Date(s): October 01, 2022 - November 15, 2022

Anticipated Funding Amount: Estimated \$50,000,000 in fiscal year 2023 for new and continuing awards

The Astronomy and Astrophysics Research Grants (AAG) Program is an inclusive and flexible funding opportunity to support research in the astronomical sciences. The Program provides individual investigator and collaborative research grants for observational, theoretical, laboratory, and archival data studies in astronomy and astrophysics. The Program also considers proposals for projects and tools that enable or enhance astronomical research. Proposals may span multiple disciplines and/or areas of study and may utilize multiple techniques.

Additional Funding Opportunities Inside the AAG Program

The AAG Program will accept Research in Undergraduate Institutions (RUI) proposals. RUI proposals submitted to the AAG program must meet the AAG requirements, guidelines, and deadlines. Information on the scope of RUI projects and the format of these proposals can be found at [Facilitating Research at Primarily Undergraduate Institutions](#).

The AAG Program will accept proposals for the funding opportunity in Computational and Data Enabled Science and Engineering (CDS&E). CDS&E proposals submitted to the AAG program must meet the AAG requirements, guidelines, and deadlines. In addition, proposals must explicitly address the CDS&E program goals within the 15-page Project Description. Please see the program description PD 22-8084 for the CDS&E program at Computational and Data Enabled Science.

Link to Additional Information: <https://www.nsf.gov/pubs/2022/nsf22624/nsf22624.htm>

24. NIDA REI: Reaching Equity at the Intersection of HIV and Substance Use: Novel Approaches to Address HIV Related Health Disparities in Underserved Racial/Ethnic Populations (R34 Clinical Trial Optional), NIH

Application Deadline:

- **Letter of Intent: 30 days prior to application due date**
- **Full Proposal: November 14, 2022; November 14, 2023**

Award Budget: up to \$450,000 for three years

The purpose of this initiative is to support pilot or feasibility research on structural factors, organizational practices, policies, and other social, cultural, and contextual influences that lead to inequities at the intersection of HIV and substance use among underserved racial and/or ethnic minority populations affected by persistent HIV disparities. Research that addresses the multiple dimensions of individuals' identity (e.g., race, ethnicity, gender, sexual orientation, gender identity) and social systems as they intersect with one another is encouraged.

Research Objectives

This initiative will support innovative pilot or feasibility research to inform efforts to address persistent inequities in HIV prevention, diagnosis, and treatment among underserved racial and/or ethnic minority populations. All projects should address social, cultural, and structural factors potentially driving inequities. Research that addresses intersectional sexual and gender minority populations is also encouraged. Areas of research can include epidemiology, prevention, and treatment services research addressing topics such as stigma, cultural competence, accessibility, acceptability, retention, mistrust/trustworthiness, and financing. Proposed studies can be:

1. observational studies, providing a deeper understanding of how social, cultural, policy and structural factors interact to perpetuate or ameliorate health inequities in HIV and substance use outcomes for racial and/or ethnic minority persons and other persons with disproportionate burden of HIV disease
2. intervention studies that test novel strategies that focus on social, structural, policy and cultural factors to reduce health disparities and lead to equity in HIV and substance use outcomes for populations affected by persistent disparities

Observational studies should clearly specify next steps for prevention/intervention research, in addition to clearly identifying and partnering with the end-users of the knowledge that would be generated (e.g., prevention scientists, public health officials, health departments, justice systems, policy makers, community organizations, etc.) and should thoroughly explain how that knowledge would be used to inform decisions and implement change. The involvement of the end-users is to ensure that the proposed data and methods will be useful. The partnerships with key end-users can be existing, or new relationships initiated based on success of previous stakeholder engagement and preparation to implement proposed work in a new setting.

Intervention studies should focus on creating scalable, replicable, and sustainable interventions. Applicants should demonstrate that collaborations are in place that are needed to conduct the research and to support its sustainability and scalability once the research study has ended. Priority will be given to research projects that are scalable with a strong potential for impact, adoption, and sustainability. Intervention research studies should also involve end-users. Applications that do not include end-user partners are of lower priority for funding. Both observational and intervention studies should clearly identify implications of the findings for research, policy, and/or practice.

At least 50% of the study population must include individuals from U.S. underserved racial and/or ethnic minority populations (i.e., persons who identify as Black or African American, Hispanic or Latino, American Indian or Alaska Native, Asian-American, Native Hawaiian, or other Pacific Islander. Studies may also include sexual and gender minority populations. Investigators must address documented disparities in HIV and substance use prevention and care outcomes. Note that preliminary data are allowed, but not required, for this FOA.

Research Design

The research design and measures proposed should be appropriate to answer the scientific questions articulated. All projects should be guided by equity-oriented theoretical models, frameworks, and relevant theories, which recognize that minority health disparities arise by multiple and overlapping contributing factors acting at multiple levels of influence. Importantly, applicants must include community engagement at all stages of the research study. Community engaged research can take many forms, including Community Based Participatory Research (CPBR), participatory or community action research, participatory rapid appraisal, and others. The strategy selected should be appropriate for the community partner and the goals of the research project. The community engagement process should reflect power sharing, maintaining equity across partners, strategies to deal with disagreements, and the flexibility required to fit the needs, priorities, and capacities within communities.

Areas of Research Interest

Projects may come from various research disciplines such as epidemiology, prevention, and treatment services research, and may address topics such as stigma, culturally competent care, accessibility, acceptability, retention, mistrust/trustworthiness, and financing of services. Research topics for this initiative include but are not limited to:

- Research on the extent to which racial and ethnic discrimination and other social, structural and systematic inequities perpetuate disparities in HIV and substance use service use and outcomes.
- Studies that examine the impact of bias and discrimination on patient-provider communication(s), informed decision-making, and HIV care outcomes.
- Research to explore strengths-based approaches for trust-building and engagement in communities that have been disproportionately impacted by HIV and substance use.
- Studies to determine the impact of policies, laws and associated social/structural characteristics that contribute to HIV case diagnoses, service utilization and clinical outcomes.
- Research to assess the benefits of telehealth, mobile and other technological approaches for populations disproportionately affected by HIV and substance use.
- Research that identifies how systematic racism is manifested in HIV service delivery and substance use settings.
- Research that examines the influence of social and structural factors (e.g., social hierarchies in care settings; the requirements placed on clients for receipt of services) on HIV and substance use outcomes.
- Research on social, structural, cultural and policy level strategies to reduce disparities related to HIV outcomes,

e.g., uptake/initiation of PrEP and/or antiretroviral therapy (ART).

- Research to enhance cultural competence, improve access to quality health care, and mitigate the adverse effects of racism on HIV, substance use and health outcomes.
- Culturally specific interventions to address social determinants of health by promoting resiliency and confronting structural racism, including studies with a focus on stigma, discrimination, and prejudice in the context of substance use and HIV prevention and treatment services.
- Studies to develop new models of research partnerships with state/local agencies and private or public health systems to eliminate systemic barriers to substance use and HIV care.
- Addressing structural racism and other impediments to HIV service utilization in primary care, HIV, substance use treatment, and other specialty settings.
- Develop and test interventions to address relevant intersectional racial/ethnic and sexual/gender stigmas, as well as substance use stigma in settings that provide HIV and substance use prevention and/or care services.

Link to Additional Information: <https://grants.nih.gov/grants/guide/rfa-files/RFA-DA-23-024.html>

25. National Institute of Allergy and Infectious Diseases (NIAID) Clinical Data and Safety Management Center (CDSMC) (U01 Clinical Trial Not Allowed), NIH

Application Deadline:

- **Letter of Intent: 30 days prior to the application due date**
- **Full Proposal: November 30, 2022**

Award Budget: need to reflect the actual needs of the proposed project

The purpose of this FOA is to solicit applications for the National Institute of Allergy and Infectious Diseases (NIAID), Clinical Data and Safety Management Center (CDSMC) that will provide data, safety, and pharmacovigilance management and processing, and sample tracking systems for NIAID-funded clinical trials and clinical studies of immune-mediated diseases. The type of research for which support will be provided includes NIAID-supported clinical trials and studies (e.g., investigator-initiated, Network-supported), integrated studies of underlying mechanisms, clinical studies (e.g., longitudinal studies, genetic studies, etc.), and studies to identify and validate surrogates/biomarkers. Current ongoing work supporting within scope functions will transfer at the time of award to the CDSMC grantee.

The overall objective of the CDSMC is to provide coordination and oversight for multiple activities in service to clinical research and mechanistic studies supported by NIAID, including for example, data collection, data management, reporting and processing, safety and pharmacovigilance, data support for Data and Safety Monitoring Boards (DSMBs) meetings, and an Electronic Specimen Tracking process for both domestic and/or international research. Thus, the CDSMC must be structured to perform in multiple functional, yet coordinated areas, such as Administrative Oversight, Clinical Data Collection, Management and Processing, Safety and Pharmacovigilance, Data and Safety Monitoring Boards (DSMBs) support and Electronic Specimen Tracking. The primary scientific areas supported through the functions of the CDSMC include, for example, asthma and allergic diseases; autoimmune disorders; immune-mediated consequences of allotransplantation and possibly xenotransplantation; primary immune deficiency disorders; and other immune system disorders and treatments to enhance immune functions. Other NIAID supported research may utilize the functions within the CDSMC under a public health emergency.

The CDSMC will support and collaborate with Statistical and Clinical Coordinating Centers (SCCCs):

- Allergy Asthma Statistical and Clinical Coordinating Center (AA-SCCC)
- Autoimmune Disease Statistical and Clinical Coordinating Center (AD-SCCC)
- Transplantation Statistical and Clinical Coordinating Center (T-SCCC)

Each statistical and clinical coordination center provides services for NIAID clinical studies, including statistical design and analysis, protocol development, eCRF design, final analysis of study findings, and reporting to DSMBs and other safety committees and Health Authorities as required. The CDSMC will work closely with the SCCC to develop eCRFs, site training and activation. The CDSMC will provide datasets to the SCCC and examples of these include data required

for analysis, DSMB reporting, study oversight, reporting to health authorities, study close out and archiving.

Link to Additional Information: <https://grants.nih.gov/grants/guide/rfa-files/RFA-AI-22-058.html>

26. Molecular Phenotypes of Null Alleles in Cells (MorPhiC) Phase I: Data Analysis and Validation Centers (U01 Clinical trials not allowed), NIH

Application Deadline:

- **Letter of Intent: October 1, 2022**
- **Full Proposal: November 01, 2022**

Award Budget: budgets need to reflect the needs of the proposed project but should not exceed \$350K direct cost per year

This opportunity seeks applications for the MorPhiC Data Analysis and Validation (DAV) centers. Applicants should focus on the MorPhiC data and approaches, and Phase 1 questions and challenges faced by the consortium and described above. The primary goals of these DAV centers are to demonstrate the following for the MorPhiC data set: (1) the data variability is controllable, (2) the data is useful to understand basic biological processes, and (3) the data is interpretable for undertaking future hypothesis-driven science by the community. DAV centers should assess, with feedback from the community, data quality, utility, and ability to integrate with other appropriate community data resources. DAV centers should collect community feedback and perform appropriate outreach to maximize the likelihood that the data generated by MorPhiC will be broadly useful.

Examples of scientific questions to be addressed by the DAV centers include (but not limited to):

- Creating appropriate statistical methods to model technical and biological variation in MorPhiC data.
- Developing methods that can help elucidate and potentially account for potential genomic-, population- or sex-based variability in molecular readouts in complex human cultured cells.
- Identifying cellular phenotypes that strongly associate with model organism or human phenotypes from MorPhiC and other data.
- Building integrative and "explainable" models that can help the consortium undertake adaptive experimental design for perturbation experiments.
- Building predictive models of untested perturbations and/or untested systems and using these models as a vehicle for experimental design within the MorPhiC consortium.
- Inferring phenotypes from existing data and validating using MorPhiC data.
- Modeling fundamental biological processes (e.g., cell fate determination, cell death) based on perturbation data to obtain causal models.
- Building novel visualizations that will help the community effectively consume complex data generated in MorPhiC that can take prior knowledge into account.

This is not intended to be an exclusive list—applicants may point out and justify other important uses of MorPhiC data that may not have been explicitly included here.

Research proposed should have a high potential to illuminate strengths and weaknesses of MorPhiC data. This FOA hopes to make it possible for a broad set of labs, including smaller labs with limited bioinformatics expertise, to undertake hypothesis-driven research based on data hosted by the DRACC (RFA-HG-21-031; expired FOA). Thus, the software and models generated should be openly and effectively shared with the community.

Informational Webinar

All applicants are strongly encouraged to contact NHGRI Staff to discuss the responsiveness and alignment of their proposed work with the goals of this program. An informational webinar will be held for potential applicants. The Webinar will be held on September 7, 2022, at 1-2 PM US Eastern DST. Further information will be posted on the NHGRI website: <https://www.genome.gov/research-funding/Funded-Programs-Projects/Molecular-Phenotypes-of-Null-Alleles-in-Cells>

Link to Additional Information: <https://grants.nih.gov/grants/guide/rfa-files/RFA-HG-22-019.html>

27. Fund for The Improvement of Postsecondary Education (FIPSE): Postsecondary Success Program, Assistance Listing Number (ALN) 84.116M, Dept. of Education

Application Deadline: October 11, 2022

Estimated Range of Awards: \$600,000 to \$1,000,000 for 24 months

The purpose of this program is to promote postsecondary completion for students close to completion, whether for students currently enrolled in higher education, students who are no longer enrolled because of challenges they faced during the COVID–19 pandemic and close to completion, or both. Institutions may opt to supplement or expand evidence-based and data-driven activities to support retention and completion for both groups. This program aims to improve student outcomes, including retention, transfer, credit accumulation, and completion, by augmenting evidence-based activities that are already underway at eligible institutions of higher education (IHEs).

Priorities:

This notice contains one absolute priority and one invitational priority.

- **Absolute Priority:** Projects that are designed to improve postsecondary student outcomes and that are supported by evidence that meets the conditions in the definition of “promising evidence” (as defined in 34 CFR 77.1(c)). In responding to this priority, applicants must identify one or more of the proposed activities (project components) that meet the promising evidence standard and include a logic model that demonstrates the relationship between such proposed activities and the relevant outcomes the project is designed to achieve.
- **Invitational Priority:** Participation by Community Colleges. Applications from community colleges (as defined in this notice).

Link to Additional Information: <https://www.grants.gov/web/grants/view-opportunity.html?oppId=343041>

28. Advanced Technologies and Instrumentation for the Astronomical Sciences (ATI), NSF

Submission Window Dates: October 01, 2022 - November 15, 2022

Anticipated Funding Amount: \$8,000,000 for approximately 10 projects

The program supports the overarching science objectives of the Division of Astronomical Sciences. Decadal surveys of Astronomy & Astrophysics may be consulted for examples of science objectives that are considered to be timely and important. The ATI program provides both individual investigator and collaborative research grants for development of new technologies and instrumentation for use in ground based astronomy and astrophysics research. Proposals may request support for advanced technology development, concept feasibility studies, and instrumentation to enable new observations that are difficult to obtain with existing means. This includes observing at wavelengths where there is electromagnetic interference from human and natural, radio and OIR sources. Proposals that principally deploy existing or off-the-shelf instrumentation should demonstrate an innovative use of such instrumentation.

The ATI program funds technology and instrument development projects that support the study of astronomical sources from ground-based observatories, which operate from optical through radio wavebands of the electromagnetic spectrum. Suitable proposal topics include innovative hardware, software and/or analysis methods that are applicable for use in research supported by the Division of Astronomical Sciences. A broad range of technologies are of relevance including (but not limited to): high contrast adaptive optics systems, extreme-precision radial velocity techniques, high resolution spectrometers, interferometers, massively multiplexed spectroscopy techniques, astrophotonics, imaging detectors, telescopes and antennae, optics and optical devices, and correlators and elements of radio cameras.

In all cases, proposals must adequately demonstrate the astronomical context of the work, or it shall be returned without review. Submissions need to demonstrate that the technology, instrumentation, and/or software being proposed will significantly advance and improve ground-based astronomy observations. Such proposed developments may also have a secondary relevance to space based projects.

This solicitation generally supports projects that are more exploratory, smaller in scope and may have higher risk than those suitable for the Mid-Scale Innovations Program or the Major Research Instrumentation Program. Please contact a

cognizant NSF program officer if you have any questions about the suitability of your proposal for submission to the ATI Program.

Link to Additional Information: <https://www.nsf.gov/pubs/2022/nsf22627/nsf22627.htm>

29. Practice-Based Research Integrating Multidisciplinary Experiences in Dental Schools (PRIMED) (U01 Clinical Trial Not Allowed), NIH

Application Deadline:

- **Letter of Intent: November 15, 2022**
- **Full Proposal: December 15, 2022**

Award Budget: budgets are not limited but need to reflect the needs of the project; maximum project period is 5 years

The purpose of the opportunity is to provide clinical faculty and predoctoral/postdoctoral students/residents with skills development opportunities and patient-oriented clinical research experiences through intra/inter-institutional collaborations and peer and student mentoring partnerships. Additionally, applicants to this FOA must describe a developmental and/or small-scale practice-based research study that involves prospective enrollment of study participants and in which clinical faculty and predoctoral/postdoctoral dental students/residents collect data from their consenting patients, to be conducted in the predoctoral/postdoctoral dental school clinic and/or affiliated extramural clinic setting.

Applications to the PRIMED FOA must include the following four required components:

1. clinical research skills development through coursework and/or research education/training opportunities
2. intra- and/or inter-institutional collaborations in which the participating dental school must collaborate with another intra- or inter-institutional entity
3. peer and student mentoring partnerships between faculty members who are research-focused and those who are clinically oriented, and between faculty members and predoctoral/postdoctoral dental students/residents
4. practice-based clinical research conducted in dental school predoctoral/postdoctoral clinics and/or affiliated extramural clinics, by incorporating practice-based research activities into the dental clinical educational setting.

The goals of PRIMED are to foster a culture of scientific inquiry during predoctoral/postdoctoral dental education, encourage scientific partnerships between students/residents, clinically oriented faculty and research faculty, and stimulate additional clinical research pursuits by conducting practice-based research in dental school clinics and affiliated clinics.

Research Objectives

A variety of study designs may be appropriate for developmental and/or small-scale practice-based research conducted in the dental school clinic setting. Examples of such studies include those ascertaining feasibility of and refining a future intervention, assessing willingness and acceptability of practitioners and patients to perform study procedures or introducing additional clinical care practices into their clinic work flow, or developing technology for use by practitioners and patients. Further, small-scale retrospective/prospective or prospective-only observational studies with clearly defined and measurable outcomes may be considered to develop evidence for the prevention, diagnosis, management and/or treatment of oral diseases and conditions. For retrospective/prospective studies, medical diagnoses and/or oral health treatment data may be available retrospectively in electronic health records (such as a diagnosis of Sjögren's Syndrome, when an implant was placed, or when orthodontic treatment was initiated), and medical and/or oral health outcomes would be collected prospectively. Examples of retrospective/prospective or prospective-only observational study designs include cohort studies that provide longitudinal follow-up of prevention or treatment practices, case-control studies with longitudinal follow-up, and health economics research of prevention or treatment practices in which health outcomes and health-related behaviors are the primary focus (see NOT-OD-16-025). Applicants should propose the strongest research design that is appropriate, acceptable and feasible to answer the research questions.

Potential applicants are strongly encouraged to contact NIDCR Scientific/Research staff well in advance of the application due date to discuss the suitability of conducting the proposed practice-based research study in dental school clinics and incorporating the four required components of clinical research skills development, intra- and/or inter-institutional

collaborations, peer and student mentoring partnerships, and practice-based clinical research into grant applications.

Examples of practice-based research studies that might be conducted in dental school clinics and/or extramural clinics affiliated with dental schools include but are not limited to:

- Research to determine impactful innovations to dental practice that reduce the risk of virus transmission and ensure the safety of personnel and patients in dental practices.
- Research collaboration between a high research-resourced dental school and high minority-serving dental school to understand racial, ethnic, and/or sex/gender differences in dental care recommended and/or received.
- Research to develop or improve diagnostic criteria, reliable markers, and/or imaging techniques for assessing the onset and progression of oral disease, such as caries, periodontal disease, pulpitis.
- Research collaboration between a dental school and other professional school to determine the prevalence or incidence of occupational risks in dentistry or plan interventions to minimize these occupational risks.
- Research collaboration between a dental school and other professional school or clinic(s) to assess the impact of gender-affirming surgery of the craniofacial region upon individuals' lived experiences and their mental health and well-being.
- Research collaboration between a dental school and medical/nursing school or clinic(s) to develop medical condition and risk behavior screening approaches in dental care settings, and to facilitate referral to treatment.
- Retrospective/prospective cohort studies assessing the impact of early interventions and/or nonsurgical treatment on later clinical outcomes in individuals born with oral clefts or other craniofacial anomalies.
- Research conducted in orofacial pain clinics at more than one dental school to assess sex/gender, racial, and ethnic differences in chronic orofacial pain diagnosis, management, and treatment outcomes.
- Research to optimize opioid risk mitigation clinical tools, such as those encouraging the use of prescription drug monitoring programs (PDMPs) and counseling prior to prescribing opioids for acute pain management to plan for a future intervention.
- Partnership between oral health and educational or technology development researchers to examine the extent to which electronic devices, social media apps could be used to promote positive oral health behaviors.
- Partnership between oral health and behavioral science or education researchers from collaborating institutions to develop and assess the feasibility of incorporating nutritional counseling into oral health care visits.

Link to Additional Information: <https://grants.nih.gov/grants/guide/rfa-files/RFA-DE-23-012.html>

30. MPRINT Translational Research Resource Platform (TRRP) (U24 Clinical Trial Not Allowed), NIH

Application Deadline:

- **Letter of Intent: November 1, 2022**
- **Full Proposal: December 1, 2022**

Award Budget: limited to \$670,000 in direct costs for a maximum project period of 5 years

The MPRINT Hub was recently established by NICHD and primarily focuses on aggregating, presenting, and expanding the available knowledge, tools and expertise in maternal and pediatric therapeutics research. This FOA, as part of the MPRINT program, aims to develop translational research resource platforms to advance maternal and pediatric therapeutics research through leveraging existing and prospective resources through collaborative multidisciplinary team science efforts. The TRRPs will work with the MPRINT Knowledge and Research Coordination Center on the implementation and dissemination of data and tools. The TRRP awardees are expected to attend the MPRINT Hub annual and other regular meetings.

For the purpose of this FOA, maternal and pediatric therapeutics is defined to encompass:

- Therapeutic treatment of obstetric and breastfeeding conditions.
- Physiological changes that occur in a person's body during pregnancy, the post-partum period, and during lactation that impact the distribution or effects of administered therapeutics.
- Passage of drug from mother to fetus during pregnancy and to child during breastfeeding, including the effects of

those drugs on the fetus or child.

- Therapeutic treatment of pediatric disease, particularly where there are unique pediatric conditions or pharmacodynamic differences from adult disease.
- Physiological changes that occur across the entire spectrum of pediatric development from birth through adolescence that impact the distribution or effects of administered therapeutics.

The objectives of this FOA are to support multidisciplinary groups of researchers to conduct collaborative, team-based science utilizing cutting-edge technologies and adapting innovative approaches to:

- Develop analytic tools and lab platforms to advance precision therapeutics in maternal and pediatric populations.
- Enable and accelerate the discovery of biomarkers with translational potential for therapeutic targets of maternal or pediatric conditions.
- Validate and support the qualification of biomarkers for maternal and pediatric conditions.

Each proposed study may employ one or more of the above approaches with an ultimate goal of delivering high quality biomarkers that have practical utilities for clinical applications.

Applicants are encouraged to form collaborations with NIH supported research networks that have a focus on maternal and pediatric conditions, such as, but not limited to, the Maternal Fetal Medicine Units Network (MFMU), Neonatal Research Network (NRN), Nulliparous Pregnancy Outcomes Study: Monitoring Mothers-to-be (NuMoM2b), International Maternal Pediatric Adolescent AIDS Clinical Trials (IMPAACT) and Pediatric Trials Network (PTN), and leverage existing or newly established resources (e.g., biobanks, biospecimen repositories, omics data, tissue specific genomic/epigenomic atlases, imaging and clinical data repositories, and EHRs). Applicants are also encouraged to explore collaborations with groups that are experienced in the use of public-private partnerships (PPPs) to advance the qualification of drug development tools, such as the Foundation for the NIH's Biomarker Consortium (<https://fnih.org/our-programs/biomarkers-consortium>).

Examples of translational resource platform-related activities suitable for this FOA, include, but are not limited to:

- Discover or validate novel biomarkers using real-world data (RWD) for patient stratification, targeted therapies, and/or drug safety prediction.
- Discover and validate biomarkers of novel therapeutic potentials or that can predict adverse pregnancy outcomes (e.g., pre-eclampsia, preterm birth).
- Develop informatics tools or utilize systems approaches, especially artificial intelligence tools, that integrate various types of data, including genomic, proteomic, metabolomic, or phenotypic data, to support the identification and validation of biomarkers in advancing precision medicine.
- Develop common analytic platforms and perform analysis of existing biological samples to address high priority questions and/or resource needs in translational and therapeutic research.
- Generate data and support filing for regulatory qualification of a biomarker with the FDA.
- Develop innovative strategies to identify and fill gaps in biological samples and data collections.
- Develop models/algorithms evaluating potential targets and toxicities of novel therapeutic strategies for pregnant, lactating, and pediatric populations

Applicants should reference the BEST (Biomarkers, EndpointS, and other Tools) resource for biomarker definitions (<https://www.ncbi.nlm.nih.gov/books/NBK338448/>).

Link to Additional Information: <https://grants.nih.gov/grants/guide/rfa-files/RFA-HD-23-018.html>

Proposals Accepted Anytime

- a. Division of Environmental Biology, NSF
<https://www.nsf.gov/pubs/2022/nsf22541/nsf22541.pdf>

- b. Mathematical Biology, NSF
<https://beta.nsf.gov/funding/opportunities/mathematical-biology>
- c. Computational and Data-Enabled Science and Engineering in Mathematical and Statistical Sciences, NSF
<https://beta.nsf.gov/funding/opportunities/computational-and-data-enabled-science-and-engineering-mathematical-and>
- d. Sedimentary Geology and Paleobiology (SGP), NSF
<https://www.nsf.gov/pubs/2022/nsf22597/nsf22597.htm>
- e. Condensed Matter and Materials Theory (CMMT), NSF
https://www.nsf.gov/pubs/2022/nsf22610/nsf22610.htm#pgm_desc_txt
- f. Division of Materials Research: Topical Materials Research Programs (DMR:TMRP), NSF
<https://www.nsf.gov/pubs/2022/nsf22609/nsf22609.htm>
- g. Research in the Formation of Engineers, NSF
<https://beta.nsf.gov/funding/opportunities/research-formation-engineers-rfe>

Forecasted Opportunities

1. Racial and Ethnic Approaches to Community Health (REACH), CDC

This 5-year program is to improve health, prevent chronic diseases, and reduce health disparities among racial and ethnic populations with the highest risk, or burden, of chronic disease, specifically for African Americans/Blacks, Hispanic Americans, Asian Americans, Native Hawaiian/Other Pacific Islanders, American Indians, and Alaska Natives by:

- Supporting culturally tailored interventions to address to promote activities to decrease tobacco use, poor nutrition practices, and physical inactivity.
- Supporting implementation, evaluation, and dissemination of practice- and evidence-based strategies of tobacco, nutrition, and physical activity collaborations that ultimately lead to reduced health disparities in chronic conditions of hypertension, heart disease, Type 2 diabetes, and obesity.
- Supporting activities to enhance capacity to educate and promote the importance of immunization among racial and ethnic minority populations.
- Linking community and clinical efforts to increase individual's access to health care and preventive care programs within their community.

Link to Additional Information: <https://www.grants.gov/web/grants/view-opportunity.html?oppId=342940>

2. Global Emergency Response and Recovery Partner Engagement: Expanding Efforts and Strategies to Improve Rapid Response to Public Health Emergencies Globally, CDC

This NOFO supports the implementation of programs and activities targeted at increasing the capacity of public health emergency partners to rapidly respond to support populations affected by humanitarian emergencies and conflict settings. Its purpose is to improve the ability to detect and respond to threats early and develop long-term, sustainable programs to rebuild resilience during and after an emergency. This NOFO will establish an Approved-But-Unfunded (ABU) list of recipients, providing a portfolio of partners that can work anywhere in the world. CDC will fund partners to respond to emergencies that require federal support to effectively respond to, manage, and address identified public health threats.

Link to Additional Information: <https://www.grants.gov/web/grants/view-opportunity.html?oppId=343012>

3. Grants to Support New Investigators in Conducting Research Related to Preventing Interpersonal Violence Impacting Children and Youth, CDC

The purpose of the Centers for Disease Control and Prevention National Center for Injury Prevention and Control (NCIPC) Mentored Research Scientist Development Award (K01) is to provide support for an intensive, supervised (mentored) career development experience in violence prevention research leading to research independence. NCIPC supports K01 grants to help ensure the availability of an adequate number of trained scientists to address critical public health research questions to prevent violence and injury. Applicants must propose a research project that addresses at least one of the research priorities in the interpersonal violence prevention section of the NCIPC Research Priorities (www.cdc.gov/injury/researchpriorities/index.html) as they relate to violence impacting children or youth (from birth through age 17). These research priorities include:

Cross-cutting violence prevention

- Adverse Childhood Experiences
- Child abuse and neglect
- Youth violence
- Intimate partner violence (teen dating violence)
- Sexual violence

Applicants are also encouraged to address the following:

- Multiple forms of violence impacting children or youth
- Firearm-related behavior, crime, injuries and deaths among children and youth
- The social or structural conditions that contribute to violence and health inequities across population groups

Link to Additional Information: <https://www.grants.gov/web/grants/view-opportunity.html?oppId=343049>

4. Minority Serving Institutions Grants Program (MSIG), Scholarships and Fellowships, Fiscal Year (FY) 2023, Nuclear Regulatory Commission

The Nuclear Regulatory Commission's Office of Small Business and Civil Rights (SBCR) objective is to fund Minority Serving Institutions' (MSI) programs and activities relevant to nuclear safety, security, environmental protection, or any other fields the Commission deems critical to its mission.

The goal of the NRC SBCR Minority Serving Institutions Grants Program (MSIGP) is to assist MSIs in their effort to increase the number of students and faculty from groups underrepresented in fields related to the nuclear industry.

The MSIGP objectives are to assist MSIs in their efforts to achieve academic excellence; build capability, capacity and infrastructure; develop human capital (faculty and students); and to create a diverse skilled Science, Technology, Engineering, and Mathematics (STEM) pipeline.

Of particular interest are areas of study aimed at:

- Computer Science (Cybersecurity, Information Technology Management)
- Engineering (Civil, Electrical, General, Mechanical, and Nuclear)
- Mathematics (Financial Management Specialist, Accounting, Budget Analyst)
- Science (General Physical, Health Physics)

Scholarship: support scholarships for STEM disciplines to develop a workforce capable of supporting the design, construction, operation, and regulation of nuclear facilities and the safe handling of nuclear materials. The STEM discipline supported by this funding is intended to benefit the nuclear safety and security sector broadly.

Fellowship: support fellowships for STEM disciplines to develop a workforce capable of supporting the design, construction, operation, and regulation of nuclear facilities and the safe handling of nuclear materials. The STEM-related discipline supported by this funding is intended to benefit the nuclear safety and security sector broadly.

Link to Additional Information: <https://www.grants.gov/web/grants/view-opportunity.html?oppId=343077>

Announcing Previous Important Funding Opportunities

- a. Office of Postsecondary Education (OPE): Fund for The Improvement of Postsecondary Education (FIPSE): Basic Needs for Postsecondary Students Program, Dept. of Education
Deadline: October 03, 2022
<https://www.grants.gov/web/grants/view-opportunity.html?oppId=342792>
- b. Improving Undergraduate STEM Education: Hispanic-Serving Institutions, NSF
Deadline: September 30, 2022; February 8, 2023
<https://www.nsf.gov/pubs/2022/nsf22611/nsf22611.htm>
- c. Inclusion across the Nation of Communities of Learners of Underrepresented Discoverers in Engineering and Science (NSF INCLUDES), NSF
Deadline: October 25, 2022
<https://www.nsf.gov/pubs/2022/nsf22622/nsf22622.htm>
- d. Engineering Research Initiation (ERI), NSF
Deadline: October 11, 2022
<https://www.nsf.gov/pubs/2022/nsf22595/nsf22595.htm>
- e. Linguistics, NSF
Deadline: January 15, 2023
<https://beta.nsf.gov/funding/opportunities/linguistics>
- f. Launching Early-Career Academic Pathways in the Mathematical and Physical Sciences (LEAPS-MPS), NSF
Deadline: January 26, 2023
<https://www.nsf.gov/pubs/2022/nsf22604/nsf22604.htm>

Students Opportunities

1. Here to Observe Program, NASA **Deadline: September 5, 2022**

Looking for undergraduate students from any faculty or major that are interested in Planetary Science! Join our Here to Observe program to get up close and personal with a NASA Planetary Science Division mission!

- Get matched with a NASA Mission Scientist or Engineer Mentor
- Learn about how NASA Planetary Missions get made!
- Participate in Science and Career development seminars
- Form a network of NASA mission team members and fellow students

To APPLY, log into SUBMITTABLE below and fill out the online application:
<https://prsgc.submittable.com/submit/234186/nasa-student-observer-program-application-here-to-observe-h2o-2022-2023>





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