

**Request for Applications:
Research Projects on Disparities in African American Men's Health
throughout the Life Course (RFA-CHAAMPS-16-001)**

The Center for Healthy African American Men through Partnerships (CHAAMPS) (U54MD008620), led by the University of Minnesota and the University of Alabama at Birmingham, invites applications for **translational and community-based research projects on disparities in unintentional and violence-related injuries and homicide, head injuries in athletes, and chronic diseases, including cardiovascular disease, stroke, hepatitis C, and cancer, especially prostate cancer, in African American men across their life course.**

I. Funding Opportunity Description

Background

Men are at greater risk of the major causes of premature death in the US (including violent/accidental death and chronic diseases) compared to women. Men also live fewer years and experience fewer quality years of life due to a greater burden of comorbid conditions. African American men experience consistently poorer health outcomes compared to Caucasian men. African American men have the highest age-adjusted all-cause mortality rate of any race-gender group in the United States (1,067.3 per 100,000 for African American men vs. 869.3 per 100,000 for Caucasian men in 2011) and a life expectancy that is at least four years lower than that of Caucasian men. Causes of death in African American men differ at various ages, with unintentional injuries being the primary cause of death in ages 1-14, homicide in ages 15-34, heart disease in ages 35-54, and cancer in ages 55-84. Multiple factors are suspected of leading to poorer health outcomes in African American males, including cultural, socioeconomic, lifestyle/behavioral, and biological. For example, African American men are less likely to have health insurance, more likely to have poor diets and be physically inactive, and more likely to have hypertension and diabetes than Caucasian men.

Purpose

In exploring the factors responsible for the differential health outcomes of African American males, CHAAMPS promotes an integrative approach that accounts for multiple pathways to poor health outcomes, including environmental factors as well as psychosocial and biological factors. CHAAMPS thus encourages trans-disciplinary collaboration between academic experts and community stakeholders to study the pathways to disparities in African American men's health.

CHAAMPS seeks to fund translational and community-based research projects that investigate the biological, psychosocial, and environmental factors driving and sustaining health disparities in African American men's health across the life course. Proposed research should consider pathways to unintentional and violence-related injuries and homicide, head injuries in athletes, and chronic diseases; and the mechanisms connecting such pathways to health disparities throughout the life course of African American men. Examples of proposed research include:

1. Studies of the relationship between psychosocial and biological factors and African American men's health during critical periods in their life course, such as youth/adolescence, young adulthood, middle age, and older adulthood.
2. Implementation and evaluation of community-based interventions to improve individual and/or socio-environmental outcomes in unintentional and violence-related injuries and homicide, head injuries in athletes, cardiovascular disease, stroke, hepatitis C, and cancer, especially prostate cancer.

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Academic-Community Partnerships

CHAAMPS encourages both community-engaged research and community-based participatory research (CBPR). Details about both types of research are provided below:

Academic-community partnership in community-engaged research: a) Community input in identifying locally relevant research questions; b) Academic researchers seek community input to ensure that the study design is culturally acceptable; c) Academic researchers consult with community representatives on recruitment and retention strategies; d) Instruments adopted from other studies are tested/adapted to fit local populations; e) Community members are involved in some aspects of data collection; f) Academic researchers share results with community members for comments and interpretation; g) Results are disseminated both in community venues and peer-reviewed journals.

Academic-community partnership in CBPR: a) Full community participation in identifying issues of greatest importance; b) The community is intimately involved in the study design; c) Community representatives provide guidance on recruitment and retention strategies and aid in recruitment; d) All instruments are developed and tested with community input; e) Data collection is conducted by community members to the extent possible, with a focus on capacity building; f) Data is shared, and community members and academic researchers work together to interpret results; g) Community members help identify venues to disseminate results and participate in the dissemination; results also are published in peer-reviewed journals.

Available Resources

To stimulate academic-community partnerships, the CHAAMPS Collaborations and Partnerships Core will connect academic investigators with community partners with national presence – the National USA Foundation, Inc., 100 Black Men of America, Inc., and the National Football League – as well as with local community partners as necessary. Applicants are encouraged to contact the Collaborations and Partnerships Core Coordinators for consultation about available resources and services. Contact information is provided at the end of this document. Additionally, biostatistical and study design support may be provided to funded pilot research projects.

II. Award Information

Available Funds: Funding is contingent upon NIH appropriations and NIMHD approval of individuals projects.

Number of Awards: Four to eight projects will be funded. It is allowable to collaborate with more than one community partner or academic institution.

Award Budget: Application budgets are limited to \$75,000 in total costs (including both direct and indirect costs) for the entire duration of the project. Funding will be disbursed in phases, contingent upon making adequate progress consistent with the proposed research plan.

Community partners must participate in the budget development and be funded at a level commensurate with their role in the project. In most cases, it is expected that between 10% and 30% of the budget will be allocated to the community partner(s). Exceptions to this general recommendation will be considered with appropriate justification. Final budgets will be determined after the selection process is completed. The Steering Committee may request budget revisions if it considers the proposed funding insufficient for a participating partner to perform the described work.

Award Project Period: The award project period is 1 year. Periodic progress reports will be required for all funded projects.

III. Eligibility Information

Faculty members at the University of Minnesota, University of Alabama at Birmingham, Johns Hopkins University, MD Anderson Cancer Center, and the University of California, Davis are eligible to apply. Applicants at the levels of Instructor or Assistant Professor must have a senior faculty member serving as a mentor. Applicants may participate in more than one application per cycle but may not submit more than one application as the Principal Investigator of a project.

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Collaboration with the CHAAMPS national community partners – the National USA Foundation, Inc., 100 Black Men of America, Inc., or the National Football League – is required for all projects. The type and level of collaboration with the CHAAMPS national community partners will depend on the type of research and the proposed specific aims. Acceptable types and levels of collaboration include:

- A project jointly led and implemented by an academic investigator and one of the CHAAMPS national community partners or their local chapter;
- A project jointly led and implemented by an academic investigator and a local community partner, with one of the CHAAMPS national community partners serving in an advisory role;
- A project led by an academic investigator with some participation of a local community partner, with one of the CHAAMPS national community partners serving in an advisory role;
- A project led by an academic investigator, without involvement of a local community partner, with one of the CHAAMPS national community partners serving in an advisory role.

IV. Application and Submission Information

Key Dates

Webinar: Live Q&A session on September 30, 2016 at 10:00 am CST

https://meetings.webex.com/collabs/url/vDPOKdIVK_ganN-IULV6BwLW_kLdVuhOK-o7CqBObom00000

Letters of Intent due: October 14, 2016

Invitations to submit a full application: November 14, 2016

Applications due: February 3, 2017

Announcement of recipients: April 14, 2017

Project start date: July 1, 2017

Letters of Intent and applications must be submitted electronically at

www.uab.edu/medicine/mhrc/research/funding-opportunities by 11:59 pm on the due date.

Letter of Intent (2 pages):

- PI/Investigator(s) names and title(s)
- Mentor(s) and title(s), if applicable
- Project title
- Project summary/abstract with objective and specific aims
- Project timeline and cost
- Description of the proposed level of academic-community collaboration
- Description of the community partner, if such partnership already exists
- Lay narrative, which should answer the following questions:
 1. How will the proposed work address the mission of CHAAMPS?
 2. How will the outcomes improve the health of African American men?
 3. How will the project findings be disseminated to the community?

Application: Investigators should submit an NIH-format application on **combined PHS 398 forms**

(<http://grants.nih.gov/grants/funding/phs398/phs398.html>) as a single Word or PDF file. Applications should be single-spaced, with at least 0.5-inch margins, and should use 11-point Arial font.

Applications should include:

Face Page

Project Summary/Abstract and Relevance

Project/Performance Sites

Key Personnel

Other Significant Contributors

Mentorship Plan – for Instructors and Assistant Professors only (limit to 1 page)

Table of Contents

Center for Healthy African American Men through Partnerships (CHAAMPS)

Detailed Budget

Budget Justification

Biographical Sketches (5-page; http://grants.nih.gov/grants/policy/faq_biosketches.htm)

Resources/Equipment

Research Strategy (6 pages, plus 1 page Specific Aims):

- a. Specific Aims (1 page)
- b. Significance
- c. Innovation
- d. Approach

Human Subjects Research (if applicable)

References/Literature Cited

Letters of Support are optional

V. Funding Restrictions

The following types of expenditures are allowable:

- a. Research supplies and animal maintenance
- b. Technical assistance
- c. Domestic travel when necessary to carry out or present the research
- d. Publication costs, including reprints
- e. Special fees (pathology, photography, etc.)
- f. Stipends for graduate students/postdoctoral fellows if their role is to support the project
- g. Equipment costing less than \$2,000
- h. Registration fees for scientific meetings
- i. Investigator salary
- j. Consultant/contractor costs
- k. Participant incentives

The following types of expenditures are **not** allowed:

- a. Secretarial/administrative personnel
- b. Tuition
- c. Foreign travel
- d. Honoraria for visiting lecturers
- e. Per diem charges for hospital beds
- f. Construction or building maintenance
- g. Office and laboratory furniture
- h. Rental of office or laboratory space (excluding rental space specific to the conduct of a study. Examples of allowable expenses would be rental of a community space for participant interviews and focus groups. Space rental from an academic institution is not allowed.)
- i. Recruiting and relocation expenses
- j. Dues and membership fees in scientific societies

VI. Application Review Information

Applications will be evaluated on the scientific merit of the project, its relevance to the scope of CHAAMPS, the strength of the partnership plan, the proposed mentorship plan, if applicable, and the applicant's potential for future funding. It is expected that awarded projects will lead to NIH R01/R03/R21 applications, K-awards, or other extramural funding.

Review Criteria

Overall Impact: Reviewers will provide an overall score, based on the NIH overall impact scoring criteria (9-point scale, with 1 being "exceptional" and 9 being "poor"). The overall score will reflect the reviewers' assessment of the likelihood that the project will exert a sustained, powerful influence on the research field(s) involved, in consideration of six scored review criteria:

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Relevance and Significance: Is the project relevant to the focus of the RFA? Does the proposal address an important issue? If the aims of the project are achieved, how will scientific knowledge, technical capability, and/or clinical practice improve? How will successful completion of the aims change the concepts, methods, technologies, treatments, services, or preventative interventions that drive this field?

Partnership Plan: Does the project clearly require a joint effort from academic and community partners? Has a contact between the academic and the community partner(s) been established? Is there a description of communication methods (i.e., meetings) between academic and community partners? Is the sharing of resources between academic and community partners appropriate? Is there evidence of support for the project from the community partner(s)? Is there a shared dissemination plan that encompasses outreach to both the scientific community and the community at large?

Investigator(s): Are the PIs, collaborators, and mentors well suited to the project? Do they have appropriate experience and training? Does the proposed mentorship plan ensure accomplishment of the project aims?

Innovation: Does the application challenge and seek to shift current research paradigms by utilizing novel theoretical concepts, approaches or methodologies, instrumentation, or interventions? Are the concepts, approaches or methodologies, instrumentation, or interventions novel to one field of research or novel in a broad sense? Is a refinement, improvement, or new application of theoretical concepts, approaches or methodologies, instrumentation, or interventions proposed?

Approach: Are the overall strategy, methodology, and analyses well-reasoned and appropriate to accomplish the specific aims of the project? Are potential problems, alternative strategies, and benchmarks for success presented? If the project involves clinical research, are the plans for protection of human subjects from research risks, and engagement with community partners adequate?

Future Funding: What is the likelihood that the pilot project will lead to an NIH R01/R03/R21 application, a K-award, or other extramural research funding?

VII. CHAAMPS Contacts

We encourage inquiries concerning this funding opportunity from potential applicants.

Informational Webinar: www.uab.edu/medicine/mhrc/images/fundingOps/CHAAMPS_Webinar_2015.pdf

Application Submissions

Online: www.uab.edu/medicine/mhrc/research/funding-opportunities

Financial/Grants Management Contacts

Lisa Rogers, MS; roger031@umn.edu; 612-626-4762

Sheikilya Thomas, PhD, MPH; sheikilyathomas@uabmc.edu; 205-975-7133

Collaborations and Partnerships

University of Alabama at Birmingham

Bianca Hawk; bhawk@uabmc.edu; 205-996-2432 or Joaniceth Thompson; joanicethompson@uabmc.edu; 205-934-6889

University of Minnesota

Laurel Nightingale, MPP, MPH; nigh0021@umn.edu; 612-624-4832

Application Submissions Contact

William A. Anderson, PhD, MPH, MPA; willand@uab.edu; 205-996-4001

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