



NACP CALL FOR PROPOSALS

For the September 2019 – August 2020 Proposal Cycle

Letter of Intent Due: October 30, 2017; Proposal Deadline: February 05, 2018

In order to identify one or more collaborative cancer-related research project(s), to be funded starting September 1, 2019 (pending NIH approval), the Partnership for Native American Cancer Prevention (NACP) invites Letters of Intent from interested investigator teams. The NACP is working to define and eliminate obstacles to health equity in areas of Native American cancer incidence, mortality, survivorship, and representation. The NACP, funded by the NIH National Cancer Institute (#U54CA143924 and #U54CA143925), is an interdisciplinary and collaborative program among Northern Arizona University, the University of Arizona Cancer Center, and Native American communities. Its mission is to alleviate the unequal burden of cancer among Native Americans of the Southwest through research, training and outreach programs that are collaborative with the communities they serve. The most recent guidelines for this Partnership are published in **PAR-15-103** and are attached. The PAR for more recent Partnerships can also be viewed through the NIH website at <http://www.nih.gov/>.

NACP GOALS – All efforts within the NACP are aimed toward the following goals:

1. To foster and support culturally appropriate research capacity at our institutions through research projects, faculty recruitment and faculty development.
2. To honor the culture of the Native American communities we serve by providing opportunities to integrate their values, beliefs and needs into every aspect of NACP.
3. To increase the number of culturally competent biomedical researchers and health workers by increasing the number of Native American students, postdoctoral fellows and faculty trained in cancer prevention, cancer control, and cancer-related health care policy.

The NACP welcomes applications for collaborative basic or translational research projects addressing cancer prevention or control. Projects involving behavioral or population science are encouraged, as are projects focusing on the Navajo, Hopi, or Tohono O’odham reservation communities. All projects must be co-led by at least one investigator at NAU and at least one investigator at UACC. **We seek to provide seed funding for projects that will develop to apply for future external support.**

LETTER OF INTENT – Interested investigators planning to submit new proposals should submit a letter of intent that briefly describes the nature and scope of the project (1 paragraph) and the names and contact information of the co-investigators from NAU and UACC. Because applications will also be reviewed by external reviewers, we ask that the LOIs also list the names and contact information for one or more potential external (outside of both NAU and UA) reviewers with expertise appropriate to the project. Please note that investigators who have a proposal idea but who have not yet identified a collaborator at the partner institution are encouraged to contact the Research Development Core PI’s Jason Wilder (Jason.Wilder@nau.edu) or Jesse Martinez (JMartinez@uacc.arizona.edu) and Ron Heimark (rheimark@medcenter.arizona.edu) *before* the above deadline. By the time the proposal is submitted, the NAU and UACC partnership collaborators must be identified.

The NACP will work with interested investigators to find collaborators at NAU or UACC, and to develop competitive proposals. LOIs should be emailed to Ms. Maria Jackson (Maria.Jackson@nau.edu) by **5 pm on Friday, October 30, 2017**. We will acknowledge receipt of your LOI immediately, and you will receive a formal response to the LOI from Drs. Wilder, Heimark and Martinez by November 10, 2017.

NEW PILOT PROJECTS/PROGRAMS (CALL FOR PROPOSALS) – We anticipate having funds to initiate 1-2 new pilot projects/programs in September 2019. Projects/Programs may be funded for up to \$120,000 per year in total direct costs to be shared between NAU and UACC, for no more than three years, with renewal for the each year contingent on project productivity. The usual funding ratio is 50% to NAU and 50% to UACC. Individual budgets should be calculated for each institution.

FULL PROJECTS (CALL FOR PROPOSALS) – We anticipate having funds to support 2 new full projects starting in September 2019. Projects may be funded for up to \$250,000 per year in total direct costs to be shared between NAU and UACC, for no more than three years, with renewal for each year contingent on project productivity. The usual funding ratio is 50% to NAU and 50% to UACC. Individual budgets should be calculated for each institution.

PROPOSAL FORMAT – Proposals should follow the NIH format for the PHS 398 Research Plan for an R21 application. Details may be found in **PAR 15-103** and in the [SF424 \(R&R\) Application Guide](#) and [NIH PHS 398 instructions](#). Proposals should contain the following sections:

- **Title Page and Specific Aims** (1 page limit): Title of project, names of co-leaders from both partner institutions, and specific aims stating the objectives of the project.
- **Relevance to NACP** (1 page limit): Describe how this project will advance the overall goals of the NACP and how Native American students/investigators/collaborators will be involved. (See below for information on research priorities for American Indian communities in Arizona, based on exchanges with our Community Action Committee and the work of our Outreach Core.)
- **Budget Pages:** For initial and entire proposed period of support, consisting of a different budget for each institution (*NIH PHS 398 Sections 4.4-4.5*; [SF424 R&R Budget](#) or [sample budget form](#))
- **NIH Biosketch Forms:** For all senior/key personnel and other significant contributors ([NIH PHS 398 Section 4.6](#) or [a link to format page](#))
- **NIH Other Support Pages:** For all senior/key personnel and other significant contributors ([NIH PHS 398 Section 4.6.1](#) or [a link to format page](#))
- **Research Strategy** (no more than 6 pages for a pilot project, no more than 12 pages for a full project) to include:
 - Significance
 - Innovation
 - Preliminary Studies
 - Approach
 - **Notes:** (1) Other Sections of PHS 398 (*Sections 5.5.4-5.5.15*) must also be completed if applicable but are excluded from page limitations. Projects Involving Outreach Research may include focus groups and needs assessments. Research projects involving clinical trials must include a data and safety-monitoring plan as described in the [SF424 Application Guide instructions](#). Any research involving human subjects will require IRB approval. In addition, projects involving participants whether or not the project is defined as a clinical trial must include an Inclusion Enrollment table that projects the number of participants to be accrued. Projects are required to comply with the instructions for the Resource Sharing Plans (Data Sharing Plan, Sharing Model Organisms, and Genome Wide Association Studies (GWAS)) as provided in the SF424 (R&R) Application Guide, as well as complying with the NIH Genomic Data Sharing Policy.

Each application must include written "Letters of Support", from the native communities they are engaged with. Any research involving Native American participants will be required to follow ABOR and university policy on Tribal Consultation.

EVALUATION CRITERIA FOR PILOT AND FULL PROJECTS/PROGRAMS – Proposals will be critiqued using the NIH scoring system:

http://grants.nih.gov/grants/peer/guidelines_general/scoring_system_and_procedure.pdf Proposals will be evaluated based on (1) scientific merit of the research project, (2) strength of the project team, (3) potential of the proposed project to garner independent external support, (4) relevance to Native American cancer related health concerns (see below), and (5) overall quality of the written application. Frequent reasons for a project to not achieve a fundable score are: (1) low scientific merit; (2) low relevance to the objectives of the partnership; (3) low potential to develop into an externally funded project/program through competitive peer review.

RESEARCH PRIORITIES FOR AMERICAN INDIAN COMMUNITIES IN ARIZONA – Some of the priority areas identified during our conversations with Community Action Committee members and community partners include:

- Cancer prevention programs, including those that incorporate traditional cultural practices and/or traditional healing (e.g., consumer education regarding healthy foods, effectiveness of traditional healing, translation of cancer information into native languages and digital formats, targeting youths for screening or for tobacco uptake control and cessation, “train the trainer” programs for cancer education interventions in communities, media and social media approaches to cancer education and advocacy, assessments of cancer health literacy and links to screening rates and/or health outcomes)
- Cancer survivorship issues (e.g., traditional foods for people undergoing treatments, patient navigation programs in Indian health care systems, family models of treatment and care, case management approaches)
- Cancer epidemiology, surveillance, and measurement (improving quality and quantity of cancer data in AZ communities; approaches to measuring cultural concepts)
- Impact of historical trauma on AIAN health and cancer disparities
- Individual health of cancer patients, survivors, caregivers, family members; factors influencing patient compliance or persistence with treatment; issues influencing provision of care (geography, economics, language barriers, cultural factors)
- Environmental causes and correlates of cancer (uranium and other mining issues and impacts, indoor air quality related to wood smoke and heating/cooling, water quality, climate change)
- Dissemination and implementation science (indigenous evaluation methods, community advocacy and outreach effectiveness, closing the loop by sharing research findings with community)
- Resilience (resilience and health promotion)
- Policy-focused research (community involvement in identifying needs, collaborating in research design and execution, feedback to policy makers in community, development and validation of indigenous health indices or indicators)
- Clinical trials (e.g., side effects of breast cancer treatments, environmental exposures and correlation with cancer)

While the following topics are not strictly cancer research topics, please know that these are topics of great interest to our community partners and there might be value in potential projects integrating some aspect of these topics with a more focused cancer research theme:

- Delivery of cancer education aimed at increasing community readiness to conduct research and to undertake cancer prevention and control programs
- Non-cancer topics of major interest (obesity, diabetes, and other metabolic disorders; asthma prevention and control; domestic violence and sexual assault; substance abuse and mental health)

PROPOSAL SUBMISSION – Proposals are due electronically by **5 pm on Monday, February 05, 2018**. One complete application package should be submitted by each pair of investigators. Applications should be submitted to Ms. Maria Jackson (Maria.Jackson@nau.edu) at NACP. After review by *ad hoc* (external) reviewers and by our Internal Advisory Committee and Program Steering Committee, proposers will receive feedback and copies of reviews in April 2018.

Proposals chosen for inclusion with our competitive renewal and subsequently approved by NCI will be funded for a project start date of September 1, 2019. Investigator teams awarded pilot projects would be eligible to submit proposals for full projects (described above) for the final two years of the NACP funding cycle.

Proposals not funded through NACP for a September 2019 start date will be considered for assistance in revising and submitting to NCI or other funding agencies through alternative mechanisms.