

## Center for Health Equity Research

### **FUNDING OPPORTUNITY FOR EARLY CAREER STAGE RESEARCHERS**

#### **Southwest Health Equity Research Collaborative (SHERC) CALL FOR PILOT PROJECT PROPOSALS**

#### **PILOT PROJECT PROGRAM**

**Letter of Intent Due Date: November 6, 2023**

**Full Proposal Deadline: February 12, 2024**

#### **Overall Goal of The Southwest Health Equity Research Collaborative (SHERC)**

[SHERC](#) is a [National Institute on Minority Health and Health Disparities \(NIMHD\)](#) grant-funded cooperative agreement (NIH #U54MD012388) within the [Center for Health Equity Research](#) at NAU. SHERC is part of the NIMHD's Research Centers in Minority Institutions Partnership. The overall goal of the SHERC is to increase basic biomedical, clinical, and behavioral research at NAU to address health disparities and advance health equity among diverse populations of the southwestern United States. SHERC will work closely with community partners to expand capacity to address health disparities in chronic and infectious diseases, as well as high-priority behavioral health conditions, as determined by community partners. We will take a team science and translational research approach within a diversity, equity, inclusion, and justice framework. We will work with schools, hospitals, community-based organizations, federally qualified health centers, the US Indian Health Service, Tribal Health Authorities, and tribal and border health programs in Arizona to develop biomedical, clinical, and behavioral interventions aimed at decreasing health disparities.

#### **Health Equity Framework:**

In the context of significant differences in the burden of disease and patterns of social inequalities in communities of color, public health researchers and practitioners have shifted from identifying health disparities to tackling the economic, social, and environmental root causes of health inequity [1, 2]. To approach this fundamental issue, the social determinants of health (SDoH) framework has emerged to define how the conditions in which people are born, grow, live, and work contribute to sickness and wellness [3]. While an important contribution to public health, the SDoH framework does not explicitly address the underlying social and institutional inequities largely based on class, race, disability status, citizenship, and gender. Health equity offers a framework of knowledge and practice rooted in a commitment to reducing and ultimately eliminating health disparities and addressing the SDoH [4, 5]. The shift in lexicon, principles, and practice from health disparities, to the SDoH and finally to an intentional commitment to health equity, signals a paradigm shift rooted in a critical understanding of justice, fairness, and power structures [4]. While health equity frameworks are more common within the public health and health care sectors, other sectors critical to advancing health equity, such as housing, economic development, transportation, education, and justice, among many others, have yet to be widely engaged.

#### **Health Disparities**

Health disparities are the differences in the burden of disease and other adverse health conditions that exist among specific populations in the United States. Health disparities do not consider the relationship to patterns of social inequalities.

## Social Determinants of Health

The social determinants of health are the conditions in which people are born, grow, live, work and age (e.g., air quality, schools, parks, jobs and housing conditions, etc.). This term does not address how or why these social, economic and environmental conditions are inequitably distributed throughout society.

## Health Inequity and Health Equity

Health inequities are the systematic, avoidable, unfair, and unjust differences in health status across population groups. These inequities are sustained over time and generations and are beyond the control of individuals. This is different from the term health disparities, which emphasizes that differences exist, but does not consider the relationship patterns of social inequalities. Health equity, in turn, is achieved when 'every person has the opportunity to attain his or her full health potential and no one is disadvantaged from achieving this potential because of social position or other socially determined circumstances' [6].

## Investigator Development Core Pilot Project Program Goals

SHERC's Investigator Development Core overall goal is to support the development of early-stage investigators ([ESIs\\*](#)) and underrepresented faculty ([UR](#)) from racially, ethnically and other marginalized communities or disadvantaged backgrounds in basic biomedical, behavioral, and/or clinical sciences with a focus on translational research, team science, and mentoring.

The PPP provides support and mentoring to ESIs and UR faculty in health equity research, with the objective of generating preliminary data that will increase investigators' competitiveness for NIH and other external health and health equity-related research funding. Investigators selected for PPP funding must agree to fully participate in the Individualized Mentoring Program (IMP). The IMP includes activities such as grant writing workshops, one-on-one mentorship meetings, career development, mentorship and team and translational science workshops, individualized development plans, and community dissemination of findings. The PPP provides seed funding for ESIs and UR scholars to establish strong and successful programs of research in health equity and supports the development of team science and translational research skills.

*\*NIH defines an **Early Stage Investigator (ESI)** as a Program Director/Principal Investigator (PD/PI) who has completed their terminal research degree or end of post-graduate clinical training, whichever date is later, within the past 10 years and who has not previously competed successfully as a PD/PI for a substantial NIH independent research award.*

## Investigator Eligibility

SHERC's PPP welcomes applications of investigators who are at the rank of Assistant Professor (tenure eligible), Assistant Research Professor, Assistant Clinical Professor, Assistant Teaching Professor, Assistant Professor of Practice, Lecturer or Postdoctoral Scholar (faculty at the Associate or Full Professor rank are not eligible). The PPP is open to investigators who (1) are NAU regular, benefit eligible, employees; (2) are eligible to serve as principal investigator on extramural grants per NAU policy <https://nau.edu/university-policy-library/principal-investigator-eligibility/>; (3) and have not previously competed successfully as a PD/PI for a substantial NIH independent research award such as a mentored K-award or R01 grant. ***UR applicants are strongly encouraged to apply to the Pilot Project Program, but it is not a requirement.***

## PPP Accomplishments

Since 2017, the PPP funded [22 pilot projects](#), engaging project leads across 4 colleges representing 11 academic units. PPP lead investigators have successfully received 46 new grants worth more than \$18M, including 13 NIH awards totaling more than \$11M, and the first K01 and K99-R00 ever awarded at NAU. At the end of funding cycle 1, 95% (19/20) of the PPP projects obtained external funding after the pilot award, focused on clinical, biomedical, or social-behavioral work. PPP investigators have published 85 peer reviewed SHERC citing publications.

### **Pilot Project Program Research Foci**

Proposed PPP projects **must** focus on biomedical, behavioral, or clinical research, with priority given to exemplary projects that (1) address health equity of diseases/conditions that impact racially, ethnically, and other marginalized communities or health disparity-impacted populations, and (2) apply principles of team science (e.g. interdisciplinary, multi-disciplinary) and [translational research](#).

**PPP Information Session** will be held on Tuesday, September 5, 12 noon – 1:30 p.m. [Register online](#). This session is optional but encouraged for applicants to learn more about SHERC and the pilot project program. All information is also available on the [PPP webpage](#).

### **Funding**

Projects will be funded for **\$50,000 per year for 2 years**. A maximum of 3 proposals will be funded (per grant year).

### **Letter of Intent Guidelines and Submission Instructions**

Please prepare an LOI according to the following instructions:

1. Title of the proposed project at the top of the document & Principal Investigator (PI) Name, Title, Department.
2. Briefly describe the nature and scope of the project to include the following (2-page limit):
  - a) Goals of the proposed research;
  - b) Objectives of the research proposed (e.g., to test a stated hypothesis, create a novel design, solve a specific problem, challenge an existing paradigm or clinical practice, address a critical barrier to progress in the field, or develop a new technology);
  - c) Summary of the expected outcome, including impact of the results in the research field(s) involved; and
  - d) How the objectives align with the goals of SHERC and relevance to health equity. See definitions of health equities and health disparities above.
3. References
4. Investigators information:
  - a) The PI may not lead more than 1 pilot project and may only submit 1 proposal per round. The PI may be a co-investigator on only 1 additional project.
  - b) Include the name of a co-investigator from a different area of expertise.
  - c) Contact information for all investigators (Name, Title, Department, email, phone)

#### **Note:**

- The 2-page limit for #2 above does not include references or investigator information.
- Publication links are allowed on the LOI document.
- The LOI cannot include foreign components, as defined by the [NIH grants policy statement](#).
- Use 11 point or larger font size, Arial font, and at least one-half inch margins ½" inch margins – top, bottom, left, and right – for all pages.

Letter of Intent is due **November 6, 2023**.

The LOI document should be submitted as a PDF file and saved as follows: SHERC\_Y8\_LastName\_PPP\_LOI, and emailed by the deadline of November 6, 2023, at 11:59pm, to [Christine.Smith@nau.edu](mailto:Christine.Smith@nau.edu).

Feedback sent to applicants regarding LOI status by **November 20, 2023**.

**Full Proposal Guidelines**

Detailed full proposal guidelines will be sent to those LOI that were accepted and invited for full proposal submission. Full proposals will follow the NIH style format for an R03 application:

[PA-20-200](#).

**Full Proposal Deadline**

Full Proposals are due **February 12, 2024**.

**Questions?**

Please contact [Christine.Smith@nau.edu](mailto:Christine.Smith@nau.edu), 928-523-5297.

Please see the [PPP webpage](#) for a complete program description and information on currently funded pilot projects.