



NIH funding opportunities



Faculty of Medicine and Health Sciences: Research Development and Support

15 July 2015

[Click on blue [hyperlink](#) for further information]

The NIH funding opportunities listed below are only a **selection** of pre-screened, currently open health funding opportunities for which **South African institutions are eligible to apply**. For a comprehensive selection of NIH funding opportunities, please visit www.grants.nih.gov.

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

Important notices

- Notice of Correction to PAR-15-280 "Multidisciplinary Studies of HIV/AIDS and Aging" R01 ([NOT-AG-15-009](#)); R03 ([NOT-AG-15-010](#)) and R21 ([NOT-AG-15-011](#)).
- Broad Agency Announcement (BAA): Immune-Based Antiviral Products for Suppression/Elimination of HIV-1, NIAID-DAIDS-NIH-AI-2015041 ([NOT-AI-15-046](#))
- Advance Notice: NIH Anticipates Transition to New Research Training Data Table Formats in FY 2016 ([NOT-OD-15-112](#))
- Registration Open for Mobile and Personal Technologies in Precision Medicine Workshop of the Precision Medicine Initiative Working Group of the Advisory Committee to the NIH Director, July 27-28, 2015 ([NOT-OD-15-115](#))
- Request for Information (RFI): Input on NIAID Data Sharing Repository, Immunology Database and Analysis Portal (ImmPort), and Services ([NOT-AI-15-045](#))
- Request for Proposals (RFP) Announcement: Comprehensive Resources for HIV Microbicides and Biomedical Prevention ([NOT-AI-15-047](#))
- NIA Announces Interest in Utilizing the CTSA Network - Trial Innovation Centers (TICs) to Study Alzheimers Disease and Other Aging-related Dementias ([NOT-TR-15-016](#))

1. Title: Bioengineering Research Partnership (BRP): Non- or Minimally-Invasive Methods to Measure Biochemical Substances during Neonatal and Perinatal Patient Care and Research

Letter of Intent due date: 30 days before application due date **Hyperlink:** [\(PAR-15-285\)](#) **Type:** RO1
Application Due Date: Oct 5, 2015; Feb 5, 2016; Jun 5, 2016; Oct 5, 2016 Standard AIDS dates apply, by 5:00 PM local time of applicant organization. Aids applications: Sep 7, 2015; Jan 7, 2016; May 7 2016

Purpose: This funding opportunity announcement (FOA) invites bioengineering and biomedical scientists to collaborate in developing non- or minimally-invasive methods for measuring biochemical substances in connection with the care of perinatal patient populations. Lab-on-a-chip methods for rapid diagnostic or prognostic purposes are also encouraged.

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

2. Title: Pre-application: Opportunities for Collaborative Research at the NIH Clinical Center

Letter of Intent due date: 30 days before application due date **Hyperlink:** [\(PAR-15-286\)](#) **Type:** XO1
Application Due Date: December 15, 2015; December 15, 2016; December 15, 2017, by 5:00 PM local time of applicant organization.

Purpose: The goal of this program is to support collaborative translational research projects aligned with NIH efforts to enhance the translation of basic biological discoveries into clinical applications that improve health. It encourages high quality science demonstrating the potential to result in understanding an important disease process or lead to new therapeutic interventions, diagnostics, or prevention strategies within the research interests and priorities of the participating NIH Institutes/Centers. Specifically, the program seeks to broaden and strengthen translational research collaborations between basic and clinical researchers both within and outside NIH to accelerate and enhance translational science by promoting partnerships between NIH intramural investigators (those conducting research within the labs and clinics of the NIH) and extramural investigators (e.g., those conducting research in labs outside the NIH), and by providing support for extramural investigators to take advantage of the unique research opportunities available at the NIH Clinical Center by conducting research projects in collaboration with NIH intramural investigators. In order to be eligible for this program, the application must include at least one intramural scientist as Program Director/Principal Investigator or collaborator, and at least some of the research must be conducted at the NIH Clinical Center. Through this collaboration, external researchers may gain access to the NIH Clinical Center and leverage the diverse Clinical Center resources, expertise, and infrastructure available to test promising laboratory- and animal-based discoveries with potential for advancing disease diagnosis, treatment and prevention. The special environment of the Clinical Center can support studies that may not be readily supported elsewhere. This may include collaborations that propose targeted increases in new patients enrolled in protocols at the Clinical Center. This FOA encourages X02 pre-applications for Opportunities for Collaborative Research at the NIH Clinical Center. The X02 pre-application is the recommended (not required) first step in the application process for the companion FOA (PAR-15-287). Potential applicants should read both FOAs. Investigators whose X02 pre-applications are meritorious, can be accommodated by the resources of the NIH Clinical Center and the relevant intramural program, and align with the research missions of the participating NIH Institutes, will be notified of the opportunity to submit a U01 application under PAR-15-287. NO awards made under this FOA.

Budget: RO1: Application budgets should not exceed \$350,000 per year in direct costs and need to reflect the actual needs of the proposed project. Project periods may not exceed 5 years. **R21:** The combined budget for direct costs for the two year project period may not exceed \$275,000. No more than \$200,000 in direct costs may be requested in any single year.

3. Title: Opportunities for Collaborative Research at the NIH Clinical Center**Letter of Intent due date:** N/A **Hyperlink:** [\(PAR-15-287\)](#) **Type:** U01**Application Due Date:** April 11, 2016; April 11, 2017; April 11, 2018, by 5:00 PM local time of applicant organization.

Purpose: The goal of this program is to support collaborative translational research projects aligned with NIH efforts to enhance the translation of basic biological discoveries into clinical applications that improve health. It encourages high quality science demonstrating the potential to result in understanding an important disease process or lead to new therapeutic interventions, diagnostics, or prevention strategies within the research interests and priorities of the participating NIH Institutes/Centers (ICs). Specifically, the program seeks to broaden and strengthen translational research collaborations between basic and clinical researchers both within and outside NIH to accelerate and enhance translational science by promoting partnerships between NIH intramural investigators (e.g., those conducting research within the labs and clinics of the NIH) and extramural investigators (e.g., those conducting research in labs outside the NIH), and by providing support for extramural investigators to take advantage of the unique research opportunities available at the NIH Clinical Center by conducting research projects in collaboration with NIH intramural investigators. In order to be eligible for this program, the application must include at least one intramural scientist as Program Director/Principal Investigator or collaborator, and at least some of the research must be conducted at the NIH Clinical Center. Through this collaboration, external researchers may gain access to the NIH Clinical Center and leverage the diverse Clinical Center resources, expertise, and infrastructure available to test promising laboratory- and animal-based discoveries with potential for advancing disease diagnosis, treatment and prevention. The special environment of the Clinical Center can support studies that may not be readily supported elsewhere. This may include collaborations that propose targeted increases in new patients enrolled in protocols at the Clinical Center. The companion FOA (PAR-15-286) encourages X02 pre-applications for Opportunities for Collaborative Research at the NIH Clinical Center. The X02 pre-application is the recommended (not required) first step in the application process for this FOA. Potential applicants should read both FOAs. Investigators whose X02 pre-applications are meritorious, can be accommodated by the resources of the NIH Clinical Center and the relevant intramural program, and align with the research missions of the participating NIH Institutes, will be notified of the opportunity to submit a U01 application to this FOA.

Budget: Application budgets need to reflect the actual needs of the proposed project. The maximum amount available per application is \$500,000 direct costs (exclusive of any contract/consortium F&A) per year; this amount includes Clinical Center costs and intramural investigator's costs attributed to the proposed research project. The NIH Clinical Center costs and intramural investigator's costs will not be included in the award paid to the grantee. The maximum project period is 4 years.

4. Title: Exploration of the Roles of Brown and Beige Adipose Tissue in Humans**Letter of Intent due date:** February 9, 2016 **Hyperlink:** [\(RFA-DK-15-031\)](#) **Type:** R01**Application Due Date:** March 9, 2016, by 5:00 PM local time of applicant organization.

Purpose: This Funding Opportunity Announcement (FOA) invites applications for Research Project Grants (R01) to investigate the biological functions of brown and beige adipose tissue in humans, other than heat production and maintenance of body temperature, and to explore their impact on human health. Specifically, it seeks to 1) identify physiologic or pathophysiologic conditions other than prolonged cold exposure under which browning of human subcutaneous or other white adipose depots occurs, or where the brown adipose tissue depot found in the neck region is expanded through browning; 2) test potential non-biopsy biomarkers of human subcutaneous beige fat and 3) explore the biological functions of human brown and beige fat.

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

5. Title: The Pancreatic Cancer Detection Consortium**Letter of Intent due date:** 30 days before application due date **Hyperlink:** [\(PAR-15-289\)](#) **Type:** U01**Application Due Date:** November 25, 2015; May 26, 2016; September 21, 2016; May 26, 2017; September 21, 2017, April 6, 2018, by 5:00 PM local time of applicant organization.

Purpose: This Funding Opportunity Announcement (FOA) invites applications from multi-disciplinary teams of researchers and clinicians to establish the Pancreatic Cancer Detection Consortium (PCDC) to conduct research to improve the detection of early stage pancreatic ductal adenocarcinoma (PDAC) and characterization of its precursor lesions. This initiative addresses one of the four research priorities identified in the National Cancer Institute's 2014 Scientific Framework for Pancreatic Ductal Adenocarcinoma. The PCDC is intended to support research for the development and testing of new molecular and imaging biomarkers for identifying patients at high risk for PDAC (because of genetic factors or the presence of precursor lesions) who could be candidates for early intervention. The research will be conducted by individual multi-disciplinary research teams, hereafter called Units. The Units will undertake studies on the following areas: identification and testing of biomarkers measurable in bodily fluids for early detection of PDAC or its precursor lesions; determine which pancreatic cysts are likely to progress to cancer; develop molecular- and/or imaging-based approaches for screening populations at high risk of PDAC; conduct biomarker validation studies; and collect longitudinal biospecimens for the establishment of a biorepository. All Units are expected to participate in collaborative activities with other Units and share ideas, specimens and data within the Consortium.

Budget: Application budgets are not limited but need to reflect the actual needs of the proposed project. Applicants may request support for up to 5 years.

6. Title: Mechanisms Underlying the Contribution of Type 1 Diabetes Risk Associated Variants**Letter of Intent due date:** January 17, 2016 **Hyperlink:** [\(RFA-DK-15-025\)](#) **Type:** DP3**Application Due Date:** February 17, 2016, by 5:00 PM local time of applicant organization

Purpose: This Funding Opportunity Announcement (FOA) encourages research project grant applications from institutions/organizations or projects to characterize the genetic variations in human genomic regions that have been putatively associated with type 1 diabetes (T1D) and conduct follow-up functional studies of particular genetic variants. In addition there are many human T1D regions for which there is no compelling functional candidate gene and thus additional work to identify causal genes and potential causal variants and elucidate the mechanisms whereby changes in the function or regulation of these genes are likely to provide crucial new insights into disease pathogenesis are also encouraged.

Budget: The application budget is limited to a maximum of \$600,000 in Direct Costs each year excluding subcontracts F&A, but budgets are expected to vary widely depending on the actual needs of the proposed project. Applicants may request support for up to 5 years.

7. Title: Secondary Analysis of Existing Databases in Traumatic Brain Injury to Explore Outcomes Relevant to Medical Rehabilitation**Letter of Intent due date:** 30 days before application due date **Hyperlink:** [\(RFA-HD-16-001\)](#) **Type:** R21**Application Due Date:** October 30, 2015, by 5:00 PM local time of applicant organization**Purpose:** The purpose of this funding opportunity announcement (FOA) is to support secondary analyses of existing databases that have been established from clinical trials, survey studies, or natural histories in traumatic brain injury (TBI). These databases offer opportunities to explore questions about survival, progression, rehabilitation and recovery.**Budget:** Application budgets are limited to a total of \$275,000 direct costs for both years; and to no more than \$200,000 in any single year. The scope of the proposed project should determine the project period. The maximum project period is 2 years.**8. Title: HIV-infected Adolescents: Transitioning from Pediatric to the Adult Care Settings****Letter of Intent due date:** 30 days before application due date **Hyperlink:** [\(RFA-HD-16-033\)](#) **Type:** RO1[\(RFA-HD-16-034\)](#) R21**Application Due Date:** January 14, 2016, by 5:00 PM local time of applicant organization.**Purpose:** The purpose of this funding opportunity announcement (FOA) is to solicit applications on transition of HIV-infected youth to adult care with the goal of developing an evidence base to support guidelines applicable to low, middle, and high income countries.**Budget: RO1:** Application budgets are limited to \$225,000 direct costs per year but need to reflect the actual needs of the proposed project. Applicants may request support for up to 5 years. **R21:** The combined budget for direct costs for the two year project period may not exceed \$275,000. No more than \$200,000 may be requested in any single year.**9. Title: Screening and Brief Alcohol Interventions in Underage and Young Adult Populations****Letter of Intent due date:** N/A **Hyperlink:** [\(PA-15-295\)](#) **Type:** RO1[\(PA-15-294\)](#) R21**Application Due Date:** 5 Oct 2015; 5 Feb 2016; 5 Jun 2016**Purpose:** The objective of this Funding Opportunity Announcement (FOA) is to encourage research on screening and brief interventions to prevent and/or reduce alcohol use and alcohol-related harms among underage and young adult populations.**Budget: RO1:** Application budgets are not limited but need to reflect the actual needs of the proposed project. **R21:** The combined budget for direct costs for the two year project period may not exceed \$275,000. No more than \$200,000 may be requested in any single year.**Brief definitions of some NIH grant mechanisms: [comprehensive list of extramural grant and cooperative agreement activity codes](#)****U01 – NIH Research Project Cooperative Agreement:** supports discrete, specified, circumscribed projects to be performed by investigator(s) in an area representing their specific interests and competencies; many types of cooperative agreements, e.g. Clinical Trials Centers; generally no budget upper limit but may be specified.**R01 – NIH Research Project Grant Program:** most common NIH program; to support a discrete, specified, circumscribed research project; generally 3-5 years; budget may be specified, but generally <\$500,000 p.a. (direct costs).**R03 – NIH Small Grant Program:** limited funding for short period to support e.g. pilot / feasibility study, collection of preliminary data, secondary analysis of existing data, small-contained research projects, development of new research technology, etc.; normally for “new investigators”; not renewable; up to 2 years; budget generally <\$50,000 (direct costs).**R21 – NIH Exploratory/Developmental Research Grant:** encourages new, exploratory and developmental research projects (could be used for pilot or feasibility studies); up to 2 years; budget total generally <\$275,000 (direct costs).**R21/R33 - Phased Innovation:** The R33 award is to provide a second phase for the support for innovative exploratory and development research activities initiated under the R21 mechanism. Although only R21 awardees are generally eligible to apply for R33 support, specific program initiatives may establish eligibility criteria under which applications could be accepted from applicants demonstrating progress equivalent to that expected under R33.Complete [Glossary and acronym list of NIH Terms](#)