Technical Assistance Webinar for RFA-MD-21-004, Understanding and Addressing the Impact of Structural Racism and Discrimination on Minority Health and Health Disparities (R01 Clinical Trial Optional)

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Webinar starts at 1:00 PM EDT
Webinar Tips

Participants will be in Listening Mode and will not be able to ask questions verbally.

Closed captioning can be accessed through this link: http://livewrite-ncc.appspot.com/attend?event=cit002

Participants may ask questions using the chat feature. Questions will be answered during the Q&A session at the end of the webinar as time permits.

These slides and a recording of today’s webinar will be available on the NIMHD website: http://www.nimhd.nih.gov/.
Agenda

I. RFA background, objectives, and expectations

II. Peer review of applications

III. Timeline for submission, review, and selection of applications

IV. Participant questions
Part I:
RFA Background, Objectives, and Expectations
Key Definitions

**Discrimination:** A socially structured action that is unfair or unjustified and harms individuals and groups. Discrimination can be attributed to social interactions that occur to protect more powerful and privileged groups or institutions at the detriment of other groups.

**Structural discrimination** refers to macro-level conditions (e.g., residential segregation) that limit opportunities, resources, and well-being of less privileged groups (Healthy People 2020, https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-health/interventions-resources/discrimination).

**Structural racism and discrimination (SRD):** SRD refers to structural discrimination on the basis of race/ethnicity and/or other statuses, including but not limited to gender, sexual orientation, gender identity, disability status, social class or socioeconomic status, religion, national origin, immigration status, limited English proficiency, or physical characteristics or health conditions.

**NIH-designated Populations with Health Disparities:** Racial and ethnic minorities, socioeconomically disadvantaged populations, underserved rural populations, and sexual and gender minorities in the U.S.
Background

• Despite increasing recognition of the role that SRD has on health and health disparities
  • Health research has largely focused on interpersonal racism and discrimination
  • SRD beyond residential segregation has not been routinely examined as a determinant of health
  • Health interventions have not addressed SRD as an intervention target

• Need for health research and interventions to incorporate constructs and measurement of SRD across multiple levels of influence
  • Organizational/institutional
  • Neighborhood/community
  • Societal
Research Objectives - 1

This initiative will support (1) observational research to understand the role of structural racism and discrimination (SRD) in causing and sustaining health disparities, and (2) intervention research that addresses SRD in order to improve minority health or reduce health disparities.
Research Objectives - 2

Expectations for all projects:

• Address SRD in one or more populations with health disparities

• **Provide a justification for why the SRD to be studied constitutes SRD**

• Provide a conceptual model identifying hypothesized pathways between SRD and health outcomes

• **Collect data on SRD beyond individual self-reported perceptions and experiences**

• Involve collaborations with relevant organizations or stakeholders
Research Objectives - 3

- Limited Resources and Opportunities
- Health Outcomes
- Structural Racism and Discrimination
- Populations with Health Disparities

- Perceptions/Experiences of SRD
Research Objectives - 3

- Populations with Health Disparities
- Limited Resources and Opportunities
- Health Outcomes

- SRD constructs used as variables to include in analyses
- Direct assessment of SRD, not just consequences of SRD
Observational Studies

Projects may

• examine the impact of SRD on health, and/or

• evaluate the impact that existing efforts to address SRD (e.g., laws, policies, programs, organizational practices and procedures) have on health

• involve primary data collection and/or secondary data analysis

• use quantitative or mixed methods approaches

Must be focused on US populations
Intervention Studies

Intervention projects may

- focus on health promotion, treatment, and/or prevention
- focus primarily on addressing SRD to improve health outcomes, or SRD may be included as one of several determinants of health addressed

Intervention projects should

- directly address the cause or source of SRD, not just help individuals or populations to cope with SRD or its consequences
- involve collaboration with leadership from organizations, agencies, or programs where the SRD is originating from or being sustained
- involve other relevant personnel or individuals within the setting (e.g., teachers, clinicians, co-workers, bystanders) as appropriate to enact changes to SRD, not just those who are directly experiencing SRD
- assess mechanisms through which the intervention modifies SRD and how these changes result in improvement in health outcomes
Specific Areas of Research Interest

• Topics/priorities of participating NIH Institutes/Centers (ICs) listed in RFA
  • Some ICs will only support intervention studies
  • Some ICs have different topic areas of interest for observational or intervention studies

• Individual ICs will be responsible for making funding decisions
  • It is critical that your project falls within the mission and priorities of at least one Institute or Center
    • Participating Offices may provide co-funding but will not be assigned applications

➢ Reaching out to one or more scientific contacts listed in the RFA is highly recommended!!
Part II:
Peer Review of Applications
Applications will be assessed for completeness by the Center for Scientific review (CSR).

Program staff from the participating Institutes and Centers will assess the applications for responsiveness.

NIMHD scientific review officer (SRO) will assemble a panel of experts from the extramural community to peer review the applications.
Preparations for Peer Review

Administrative Review of Applications
  • RFA requirements

Scientific Expertise
  • as defined in FOA
  • collective content of the applications

Attention to Conflict of Interest

Diverse representation
  • gender/ lifespan
  • demographics
  • geography
Peer Review Criteria

Reviewers evaluate each applicant’s potential to succeed

Overall Core (Preliminary score)

- Significance
- Investigators
- Innovation
- Approach
- Environment

FOA Specific Characteristics

- Program goals
- Mechanism specific characteristics
- Review Criteria: Specific to this FOA queries
Additional Review Criteria
(included in the determination of the overall score)

Human subjects

**Guidelines for the Review of Human Subjects**

Protection of Human Subjects against research risk
Five criteria

Inclusion

**Guidelines for the Review of Inclusion in Clinical Research**

Women
Minorities
Lifespan
Review Process

- Pre-Meeting Written Opinions
- Overall Impact
- Resume
Some applications may be “streamlined” -- not discussed (ND)

- Applications may undergo a selection process in which only those applications deemed to have the highest scientific and technical merit (generally the top half of applications under review) will be discussed and assigned an overall impact score.

Final Impact Score based on average of all voting reviewers x 10

- Scores range from 10 (exceptional) to 90 (poor)

A summary statement for all applications would be available approximately 30 days after the review meeting

Do not contact the members of the review panel!
Videos on Peer Review Topics

The Center for Scientific Review has produced videos with an inside look at peer review for scientific and technical merit and with tips for preparing applications.

https://era.nih.gov/era_training/era_videos.cfm

Resources For Using ERA Commons

https://era.nih.gov/sites/default/files/eRA-Commons-Resources.pdf

Problems with Submission Processing

Always contact ERA Service Desk.

http://grants.nih.gov/support/
In Doubt

Phone NIH

• Peer Review, Program and Grant Administration Contacts are included on the last slide of this presentation and in the RFA.
Part III: Timeline for Submission, Review, and Selection of Applications
Timeline

- Letter of Intent Due Date: July 20, 2021
- Application Due Date: August 24, 2021
- Peer Review Meeting: November 2021
- Council Review: January 2022
- Earliest Start Date: April 2022
NIMHD Contacts

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See other scientific/research and financial/grants management contacts in the RFA.
Part IV: Participant Questions

Send questions via webinar chat.