EXHIBIT 27

UNITED STATES DISTRICT COURT FOR THE DISTRICT OF MASSACHUSETTS

AMERICAN PUBLIC HEALTH ASSOCIATION, *et al.*,

Plaintiffs,

v.

Case No. 1:25-cv-10787-BEM

NATIONAL INSTITUTES OF HEALTH, et al.,

Defendants.

DECLARATION OF SCOTT W. DELANEY, ScD JD MPH

I, Scott W. Delaney, pursuant to 28 U.S.C. § 1746, declare as follows:

1. I am offering this Declaration in my individual capacity and not on behalf of my employer.

2. I am an epidemiologist at the Harvard T.H. Chan School of Public Health (HSPH). My research investigates how environmental, social, and legal forces affect neurodegenerative diseases in older Americans and neurodevelopmental health in American children. I have conducted epidemiologic research at HSPH in various capacities—first as a student, then as a postdoctoral research fellow, and finally as an independent researcher—for 11 years. I hold a Doctor of Science from HSPH (ScD, 2020); a Master of Public Health from the Johns Hopkins Bloomberg School of Public Health (MPH, 2015); a Juris Doctor from the University of Illinois College of Law (JD, 2004); and a Bachelor of Science from the University of Illinois College of Business (BS, Finance, 2000). Prior to my career in epidemiology, I practiced law in several capacities.

3. Formally, I hold the title of Research Scientist at HSPH. Research Scientists at HSPH have full privileges to conduct independent research and apply for grant funding as Principal Investigators (PIs). Throughout my career in epidemiology, I have applied for and received multiple types of grants from NIH either individually or as part of teams. These include training grants (T90 and T32 as a student trainee), a fellowship grant (F31 as a student PI), multiple loan repayment awards ("L" grants as a PI), and multiple research "R" grants (as a Co-Investigator). Moreover, my current research activities are supported almost entirely by NIH research grants. Based on these experiences, I am exceedingly familiar with a broad spectrum of grant mechanisms available from NIH.

4. In early March 2025, I read news articles reporting that political appointees within the Department of Health and Human Services (HHS)—either at NIH or elsewhere—were directing NIH to terminate certain research grants. These news articles reported that NIH was specifically targeting grants addressing transgender issues or "diversity, equity, and inclusion" (DEI) topics, but those terms were never defined in the press. Importantly, news articles contained little detail on specific examples of terminated grants, and it was not publicly known how many grants had been terminated, which grants had been targeted for termination, or the exact reasons that the grants were being terminated beyond the nominal excuses noted above. This lack of government transparency raised challenges for the health science research community.

5. On March 7, 2025, I created an online spreadsheet using Google Sheets to track news reports of specific terminated NIH grants. The first version of the Google Sheet included three columns of information for each terminated NIH grant, including the grant's title and type (e.g., R01, etc.), and the NIH institute or center (IC) that had funded the grant. Because news reports were scarce, I also sought to crowd-source information on terminated grants. To that end, I

posted a message and link to the Google Sheet on Bluesky, a social media platform commonly used by academic researchers, asking the Bluesky community to add any information about terminated grants they knew about to the Google Sheet.

6. In the ensuing 1-2 weeks, I received multiple user-submitted entries of terminated grants, which I attempted to verify manually using data from NIH RePORTER, a searchable online database of NIH grants, and by emailing affected PIs. I also began tracking a larger number of characteristics about each terminated grant, and I expanded the number of internet sources I used to find evidence of terminated grants. In mid-March, the website for the HHS Tracking Accountability in Government Grants System (TAGGS), published for the first time a short PDF list of grants that NIH had terminated. The list, however, was both incomplete (i.e., it did not list all grants that had been terminated at that time) and somewhat inaccurate (i.e., it listed some grants twice and appeared to include a grant that had not yet been terminated).

7. As a result, I attempted to manually verify information in this HHS TAGGS PDF document to the greatest extent possible, and I used it to supplement information gleaned from news reports, user submissions, Doge.gov, and other internet sources. As the Google Sheet of terminated grants grew, I began to publicize it more broadly via emails to my professional network and through frequent posts about it on Bluesky. In response to these efforts, I received suggestions to meet with many other researchers who either had their grants terminated or were interested in the terminated grant tracking effort. One such researcher was Dr. Noam Ross of rOpenSci.

8. At the same time that I was building out the public-facing Google Sheet and crowdsourcing information about terminated grants, Dr. Ross was engaged in an independent effort to scour federal databases, including NIH RePORTER, USASpending.gov, and the HHS TAGGS

system, for evidence of terminated grants. These systems track government accounting actions related to grants, including changes to government financial outlays (i.e., payments) for grants. Thus, for example, if Dr. Ross observed on USASpending.gov that the budget for a specific grant was prematurely changed to \$0, he used that information as one piece of evidence that the grant may have been prematurely terminated. These federal databases, while technically public, are difficult to access and interpret. Dr. Ross' efforts to combine and organize evidence of grant terminations from these sources was highly complementary to my news- and crowd-sourced evidence. In mid-March, we met virtually and agreed to combine our efforts to form the current iteration of our terminated grant tracking platform. Thus, all counts of terminated grants set forth in this Declaration—as well as the underlying database of terminated grants that we have built together—result from our combined efforts.

9. Data in our database of terminated grants come from several sources. Among them are affected Principal Investigators (i.e., scientists), who we encourage to submit information on their terminated grants using a Google Form, which we have designed and published specifically for this purpose. We also aggregate data from news reports, social media, Doge.gov, USASpending.gov, NIH's X feed, NIH RePORTER, and the HHS TAGGS system. The HHS TAGGS system provides data in two ways. First, it details grant-based financial transactions with information that is updated at least daily. Second, TAGGS administrators periodically (~1/week) release a PDF list of terminated grants. The TAGGS PDF list is one source of information in our database among several. Because we aggregate from multiple sources, our database includes grants not yet listed on federal government websites, including the HHS TAGGS PDF of terminated grants, and we believe it is the most comprehensive, up-to-date resource currently available that quantifies and characterizes terminated grants.

10. To ensure each reader can objectively verify all details of our database, we list NIHissued grant serial numbers, which are unique to each grant, website hyperlinks to federal databases describing each grant, and many other details for each terminated grant. These efforts to ensure transparency are critical for multiple reasons. Foremost is that the NIH grant termination process has been extraordinarily chaotic—far more so than is often reported in news articles. In many cases, the government has often provided incorrect and shifting information (knowingly or not) about exactly which grants were terminated, when, and why. Their estimates of the dollar value of grants terminated are even more unreliable. We also believe the government has restored a limited number of grants that it previously terminated, often without providing public notice. As a result, our database may contain a small number of minor inaccuracies. Nevertheless, based on my experience, I believe our dataset is the most accurate and most complete dataset of terminated grants currently available.

11. Our database includes extensive metadata on at least 28 different characteristics of each terminated grant. Among other characteristics, we track each grant's title, abstract (which succinctly describes the scientific background and aims of the grant), public health relevance statement (which is an NIH-required statement explaining in plain language how the grant will improve the public's health), and the grant's project terms (which describe the topics that relate to the grant's scientific aims). This enables us to characterize the health challenges and diagnoses each grant is meant to research. It also allows us to infer possible bases for each grant's termination.

12. Our database reveals that, on February 28, 2025, NIH began terminating hundreds of grants on topics that NIH is statutorily required to research. Specifically, as of Friday, April 18, 2025, at 11:00 p.m. EDT, we have identified 755 grants that NIH has terminated thus far based

on vague "policy" assertions. A true and correct list of these terminated grants is attached to this Declaration as Exhibit A. This number excludes grants that both (1) were terminated at Columbia University for alleged Title VI violations and (2) did not relate to topics otherwise targeted for termination. Importantly, this number almost surely underestimates the true number of terminations. While we often identify new terminations within 1 to 3 days of their effective date, it can take 10 to 14 days or more or us to learn of some new terminations. Thus, based on my experience tracking these grant terminations, I estimate there could be at least 100 more terminations than we currently count, and NIH continues to terminate new grants every week.

13. Terminated grants focus on a wide variety of health outcomes. These include projects on breast cancer, uterine cancer, anal cancer, stroke risk, cardiac health, Alzheimer's Disease, HIV prevention, suicide prevention, infertility, alcohol use disorder, smoking cessation, eating disorders, sexually transmitted infections, Covid-19, depression, psychopathology, pain, and many other conditions that very often disproportionately burden minority communities. Other terminated grants studied the harmful effects of health misinformation, discrimination, poverty, racism, loneliness, transphobic policies, and social stress, as well as the health-protective effects of social support, education, and school-based mental health interventions.

14. I also sought to quantify the financial impact of terminating these grants using grantspecific budgetary data from USASpending.gov, TAGGS, and NIH RePORTER. These systems report detailed information on financial budgets and outlays for all NIH grants, including the total budget allocated to each grant and the total outlay (i.e., money already transferred to recipients) for each grant. For example, grant R01ES035053 was a five-year grant to study reasons why Black women in the United States have higher rates of infertility than White women. The grant began in April 2023 and was scheduled to continue through January 2028.

USASpending.gov lists the total budget allocated for the full five years of this grant as \$1,447,869.00. However, on March 27, 2025, NIH prematurely terminated this grant. USASpending.gov reports that, prior to termination, the government had paid out \$649,351.22 on the grant, leaving \$798,517.78 in unspent funds. We calculated the total financial impact of all grant terminations by aggregating these grant-specific budget numbers across all grants in our database.

15. The total budget originally allocated to the 755 grants in our database was approximately \$3.0 billion. Most grants were terminated midstream after investigators had already launched their studies and spent a portion of the budgets they expected to receive. As a result, \$1.4 billion has already been spent on projects stopped midstream, leaving the aggregate unspent value of these grants at \$1.6 billion.

16. While NIH targeted a somewhat jumbled mix of grant *topics* for termination, it also targeted a spectrum of grant *types*. These types include project-based (i.e., research) grants, which support research on specific public health challenges that are set forth in the strategic plans of each IC. For example, the 2020-2025 strategic plan for the National Institute on Minority Health and Health Disparities (NIMHD) prioritizes research to "develop and test interventions to reduce health disparities." Consistent with this goal, NIMHD, through its director, issued Grant Number 5R01MD017509 for a 5-year intervention beginning May 14, 2022, to test whether directly reducing the income gap among older African American men in rural communities enhances their health and wellbeing. The grant was scheduled to last through January 2027. However, on March 14, 2025, half-way through the intervention, the grant was terminated. In another instance, NIMHD funded a proposed multi-year grant entitled, "Development of School-Based Prevention Intervention to Promote Adolescent Mental Health

Equity." The grant began on January 31, 2025, but was terminated just 40 days later on March 12, 2025. These grants exemplify a pattern, in which IC-specific directors awarded grants consistent with their IC-specific strategic plans, after which the grants were summarily terminated despite no change to IC-specific or overall NIH strategic plans.

17. In addition to research grants, NIH has also targeted training grants, which support the development of the next generation of health scientists. Training grants are key to meeting NIH's statutory obligations, and NIH Strategic Plan recognizes that the "strength of the NIH workforce depends on its sustainability and diversity." It observes that "[g]round-breaking, impactful biomedical and behavior research depends upon a diverse workforce, composed of people . . . from different backgrounds, who can provide a richness of perspectives necessary to inspire new ideas." NIH pursues this strategic goal with a mix of programs—some created directly by Congress, others by NIH—that support students and early career researchers at all stages of their training, from undergraduate studies through post-doctoral research.

18. For example, in 1974, Congress created the NIH National Research Service Award (NRSA) program to ensure "the availability of excellent scientists" in biomedical and behavioral research. This program was later renamed the Ruth L. Kirschstein National Research Service Award program, and its explicit aim today is "to ensure a diverse pool of highly trained scientists." To advance the aims of the NRSA program, NIH has created several grant mechanisms, which are designated with codes including F30, F31, F32, F33, F34, F35, T32, T34, T35, T90, TL1, and TL4. Some of these grants are run by institutions, while others are awarded to individual investigators. All NRSA grants, however, are awarded in service of Congress' command to support the training and development of a diverse corps of health science

researchers. Since February 28, 2025, NIH has terminated at least 139 NRSA grants with an aggregate budget of \$153 million, of which \$102 million was unspent prior to termination.

19. In addition to prematurely terminating large numbers of NRSA awards, NIH also changed the aim of them to remove any mention of recruiting diverse scientists. For example, among the most common types of NRSA grants are institutional T32 training grants. On November 15, 2024, NIH issued a new program announcement (PA-25-168) for the primary T32 grant mechanism, called the "Ruth L. Kirschstein National Research Service Award (NRSA) Institutional Research Training Grant (Parent T32)." A true and correct copy of this program announcement is attached to this Declaration as Exhibit B. Like all eleven Parent T32 program announcements released during the past 25 years, PA-25-168 explicitly announced that the purpose of the NRSA program was to "help ensure that a *diverse* pool of highly trained scientists is available" for health science research.¹ PA-25-168 further noted that "individuals from diverse backgrounds, including underrepresented racial and ethnic groups, individuals with disabilities, and women are always encouraged to apply." And, critically, PA-25-168 (as it was originally issued) provided that reviewers of T32 applications should (1) consider the strength of the application's proposed "recruitment plan[s] to enhance diversity," and (2) "examine the strategies to be used in the recruitment of prospective candidates from underrepresented groups."

20. However, sometime after January 30, 2025, with no prior notice to potential applicants, NIH changed the language of PA-25-168 and added a banner to the top of the announcement reading "March 31, 2025 / This funding opportunity was updated to align with agency priorities." A true and correct copy of this program announcement is attached to this Declaration

¹ Parent T32 program announcements containing this language include PA-23-048, PA-20-142, PA-18-403, PA-16-152, PA-14-015, PA-11-184, PA-10-036, PA-08-226, PA-06-468, PA-02-109, PA-00-103.

as Exhibit C. Specifically, NIH removed all mention of diversity and all requirements to ensure the recruitment of diverse scientists. For example, the stated purpose of the program after the announcement was changed reads "to help ensure that a pool of highly trained scientists is available" for health science research, with the word "diverse" is conspicuously absent. The program announcement no longer encourages applicants from diverse backgrounds and, more importantly, no longer requires that reviewers of the applications evaluate the application's diversity-enhancing recruitment plans. Similar changes were made to other large NRSA program announcements, including the Parent F30, Parent F31, and Parent F32. In short, despite Congress' mandate to support scientists from diverse backgrounds, NIH scrubbed all requirements to ensure diversity from its most popular NRSA programs.

21. A separate example of terminated training grant programs from the Congressionally created NRSA initiative is the Minority Access to Research Careers program, which was first created in 1977. While the program's name has since changed to the Maximizing Access to Research Careers (MARC), its core goal has remained the same for 48 years, i.e., "to create and sustain inclusive [undergraduate] training environments for trainees from diverse backgrounds." Moreover, NIH has since created additional programs to augment MARC, most notably, the Undergraduate Research Training Initiative for Student Enhancement (U-RISE), which was launched in 2019. U-RISE explicitly aims "to develop a diverse pool of undergraduates" who plan to pursue higher education and careers in biomedical research. U-RISE and MARC effectuate the aims of the Congressionally created NRSA program by supporting mentorship, training, and other opportunities for diverse students at domestic universities, i.e., universities develop, apply for, receive, and administer both MARC and U-RISE grants.

22. For nearly 50 years, these programs have operated to diversify the biomedical workforce, supporting thousands of students from underrepresented backgrounds during that time. In 2024, NIH supported 63 U-RISE and 34 MARC programs. In the course of updating our database of terminated grants, I learned from press reports and personal communications that, on March 27, 2025, NIH issued stop work orders for all or nearly all U-RISE grants as well as many MARC grants. Moreover, the project end dates for many of these U-RISE grants has since been changed in federal databases to March 31, 2025, suggesting the entire nearly-50 year old program has been permanently terminated.

23. Other NIH programs aim to diversify the workforce at later stages of training. For example, through the congressionally required "Next Generation Researchers Initiative," the NIH aims to achieve sustainability by "enhanc[ing] opportunities for early-stage researchers by prioritizing funding of independent research applications" of early-stage researchers "such as policies to ... enhance workforce diversity." One approach to diversifying the workforce is called the Individual Predoctoral Fellowship to Promote Diversity in Health-Related Research (F31 Diversity), which supports promising graduate students in their final years of dissertation research. Another approach is NIH's Maximizing Opportunities for Scientific and Academic Independent Careers (MOSAIC) program, which facilitates the transition of promising postdoctoral researchers from diverse backgrounds, including those from underrepresented groups, to academic faculty positions at institutions throughout the country. These grant mechanisms fund a wide spectrum of research projects, from bench science to qualitative studies, such that the majority of the research they fund is unrelated to transgender health or DEI issues. Yet, in the past four weeks, NIH has terminated 19 F31 Diversity awards. Because many of these grants were on topics wholly unrelated to DEI issues, they were targeted based on the status of

the principal investigator's status as an underrepresented minority scientist. Moreover, all F31 Diversity and MOSAIC grant opportunities have disappeared from NIH's website.

24. Still another program to secure a diverse workforce of health scientists is the "Faculty Institutional Recruitment for Sustainable Transformation (FIRST) initiative," which aims to transform culture at NIH-funded institutions through the recruitment of faculty cohorts who have a demonstrated commitment to "diversity and inclusive excellence". On December 8, 2020, NIH issued RFA-RM-20-022, which was a call for grants entitled "NIH Faculty Institutional Recruitment for Sustainable Transformation (FIRST) Program: FIRST Cohort (U54 Clinical Trial Option)." This call was reissued twice in subsequent years as RFA-RM-21-025 and RFA-RM-22-008. In 2024, the FIRST initiative funded programs at 15 different universities. All 15 have since been terminated prematurely: 1 was terminated on March 12, 2025; 2 were terminated on March 21, 2025; and 12 were terminated on April 8, 2025. Combined, these programs comprised a \$163 million investment on behalf of NIH in workforce development. Yet, NIH terminated each of these programs midstream, rescinding \$106 million in funds these programs expected to spend over the next two-to-three years.

25. Beyond the termination of NRSA grants and cuts to the MARC, U-RISE, MOSAIC, and FIRST programs, I have learned through personal communications with affected Principal Investigators as well as press reports that NIH may also have terminated the Initiative for Maximizing Student Development (IMSD), the Institutional Research and Academic Career Development Awards (IRACDA), and the Postbaccalaureate Research Education Programs (PREP), which also supported the training of diverse researchers. Taken together, these widespread terminations of training grants—in addition to the terminations of many research

grants described above—comprise an abrupt and unprecedented reversal of support for health science research in the United States.

I declare under penalty of perjury that the foregoing is true and correct.

Executed this day of April, 2025.

OTT W. DELANEY SC

EXHIBIT A

Award Number	Project Title	Awardee Organization	Termination Date
DP2AI164315	One Ballroom: Understanding Intersectional Stigma to Optimize the HIV	University Of California-Irvine	2/28/2
K01AG056669	Prevention Continuum among Vulnerable Populations in the United States The Epidemiology of Alzheimer's Disease and Related Dementias in Sexual	University Of Nevada Las Vegas	2/28/2
OT2OD035935	and Gender Minority Older Adults: Identifying Risk and Protective Factors Leveraging a community-driven approach to address the impact of social	Urban Health Partnerships	2/28/2
01200033833	determinants of health on structural inequities among Miami-Dade County's intergenerational LGBTQ+ Community		212012
OT2OD035935-01S1	Leveraging a community-driven approach to address the impact of social determinants of health on structural inequities among Miami-Dade County's intergenerational LGBTQ+ Community	Urban Health Partnerships	2/28/2
R01AG063771	Effects of Social Networks and Policy Context on Health among Older Sexual and Gender Minorities in the US South	Vanderbilt University	2/28/2
R01MD012793	Advancing novel methods to measure and analyze multiple types of discrimination for population health research	Harvard School Of Public Health	2/28/2
R21AA029513	Health Effects of Intersectional Stigma among Sexual Minority Women	University Of California Santa Barbara	2/28/2
R21AA030373	Internal Sources of Minority Stress and Alcohol Consumption	Texas Tech University	2/28/2
R21CA284313	TRANSforma Tu Salud Dejando de Fumar: Advancing smoking cessation among transgender individuals	University Of Rochester	2/28/2
R21MD016457	Facilitators of and barriers to healthcare utilization among racially and ethnically diverse transgender and gender nonbinary young adults	University Of Central Florida	2/28/2
R21MD016962	Racialized Sexual Discrimination (RSD) and Psychological Well-being among Young Sexual Minority Men of Color (YSMMoC)	University Of Illinois At Urbana-	2/28/2
R44AG080843	SilverBills: A Legal, Technical and Financial Tool for Aging LGBTQ+	Champaign Silverbills Inc.	2/28/2
R44AG080843-02S1	Individuals with Impaired Cognition. SilverBills: A Legal, Technical and Financial Tool for Aging LGBTQ+	Silverbills Inc.	2/28/2
RF1MH132348	Individuals with Impaired Cognition. Improving mental health among the LGBTQ+ community impacted by the	Brown University	2/28/2
SC3GM136580	COVID-19 pandemic Trajectories of Adaptation to Traumatic Stress in a Vulnerable Population	Hunter College	2/28/2
J01MH136558	TransHealthGUIDE: Transforming Health for Gender-Diverse Young Adults	Boston Children's Hospital	2/28/2
J24MD017138	Using Interventions to Drive Equity FIRST Coordination and Evaluation Center to promote inclusive excellence	Morehouse School Of Medicine	3/1/
31GM153136	Understanding how chromosomal makeup and cross-sex hormone administration affect wound healing in mice	Johns Hopkins University	3/3/2
F31HL172648	Cross Sex Steroid Therapy and Cardiovascular Risk in the Transgender Female	University Of Mississippi Med Ctr	3/3/2
R01AI171984	The roles of genetics, hormones, and gender in sexually dimorphic immune response	Van Andel Research Institute	3/3/2
R01DK129239	Mitochondrial-based Determinants of Sex Differences in Acute Kidney Injury	University Of Alabama At Birmingham	3/3/2
R01HD098233	Reproductive Consequences of Steroid Hormone Administration	University Of Michigan At Ann Arbor	3/3/2
R01HD111650	Androgen effects on the reproductive neuroendocrine axis	University Of California, San Diego	3/3/2
R01HD115881	Microbiome mediated effects of gender affirming hormone therapy in mice	Emory University	3/3/2
R01MD019678	Mental Health Risk and Resilience among Latinx SGM Adolescents and their Parents	University Of Arizona	3/3/2
R21EB030851	Personalized 3D avatar tool development for measurement of body perception across gender identities	Centre For Addiction And Mental Health	3/3/2
-30HD107932	Enhancing K-12 School Safety During a Respiratory Viral Pandemic	Yale University	3/10/2
31AI178878	Epidemiological factors related to human monkeypox virus (MPOX) in men who have sex with men (MSM) in the United States	Johns Hopkins University	3/10/2
(01DK125616	Implementation research to improve the uptake of influenza vaccination in CKD	Johns Hopkins University	3/10/2
(01MH132899	Using Data Science to Quantify the Impact of Misinformation, Mistrust, and Other Key Psychosocial Factors on Vaccine Hesitancy Among Vulnerable	University Of Minnesota	3/10/2
(23HD107184	People Experiencing Psychopathology Digital Storytelling to Reduce Pediatric Influenza Vaccination Disparities: A Pilot Pragmatic Trial	Denver Health And Hospital Authority	3/10/2
(23HD111624	Improving Vaccine Delivery in Hospitalized Children	Seattle Children's Hospital	3/10/2
(23HD112599	Caregiver decision making for seasonal respiratory vaccines for children	Children's Research Institute	3/10/2
R01AI165768	Population-level assessment of early childhood vaccination timeliness, parental vaccine hesitancy, and immunization schedule adherence in the	University Of Montana	3/10/2
R01AI166967	United States, including rural-urban disparities PROmotion of COVid-19 VA(X)ccination in the Emergency Department - PROCOVAXED	University Of California, San Francisco	3/10/2
R01AI169239	Uptake, Safety and Effectiveness of COVID, Äê19 Vaccines during	University Of San Francisco	3/10/2
	Pregnancy Alaska Native Communities Advancing Vaccine Uptake	Southcentral Foundation	3/10/2

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R01AI182165	Text4Vax: Understanding the Effectiveness and Implementation of Text	Columbia University Health Sciences	3/10/25
R01EY028739	Message Reminders for Pediatric COVID-19 and Influenza Vaccines The Impact of the Herpes Zoster Vaccine on Herpes Zoster Ophthalmicus	University Of California, San Francisco	3/10/25
R01HD107753	Maternal COVID-19 Vaccination and Lactation Outcomes	Healthpartners Institute	3/10/25
R01HD110428	Modeling Adolescent Health Care Decision-Making for Vaccines: A	University Of Pittsburgh At Pittsburgh	3/10/25
R01HG012830	Community- Based Participatory Approach Religion and support for genomic healthcare: An exploratory study of the	Washington University	3/10/25
R01MH132415	US public and faith leaders. Understanding the Regional Ecology of a Future HIV Vaccine	University Of Pennsylvania	3/10/25
R01NR020482	Leveraging community-based behavioral health to increase vaccine uptake	Boston College	3/10/25
	in Latinx adults with mental illness		
R15AI176375	COVID-19 Vaccine Uptake and Risk Mitigation Behaviors: Understanding the Role of Institutional Trust	Bentley University	3/10/25
R15GM152943	Mathematical Modeling and Scientific Computing for Infectious Disease Research	University Of Tennessee Chattanooga	3/10/25
R21AI182822	Covid-19 transmission, testing, and vaccination dynamics within migrant worker social networks	University Of Chicago	3/10/25
R21AI183544	Understanding transgender women's immune and behavioral responses to seasonal COVID-19 vaccines to improve their uptake	New York Blood Center	3/10/25
R21HD109536	Evaluating Teen-Parent Dynamics in Adolescent COVID-19 Vaccine	University Of San Francisco	3/10/25
R21HD110837	Acceptance and Uptake Reducing Vaccine Hesitancy among Hispanic Parents of COVID-19 Vaccine-Eligible Children	Arizona State University-Tempe Campus	3/10/25
R21HD110912	COVID19 vaccine hesitancy among perinatal women at risk for health	Butler Hospital (Providence, Ri)	3/10/25
R25GM132758-03S1	disparities One Health Education: Connecting Humans, Animals, and the Environment	University Of Rochester	3/10/25
R25GM132910-05S1	Partnerships for Prevention: A plan for managing student stress, anxiety, and pain through interactive at media.	Duquesne University	3/10/25
R35GM146974	Digital data streams and machine learning for real-time modeling of vaccine-preventable infectious diseases	Boston Children's Hospital	3/10/25
RF1MH132360	Brief digital intervention to increase COVID-19 vaccination among individuals with anxiety or depression	Graduate School Of Public Health And Health Policy	3/10/25
U54CA284030	The Empilisweni Center for Women's Health - Advancing Implementation of Equitable Cervical Cancer Control	Columbia University Health Sciences	3/10/25
U54GM115516	Northern New England Clinical and Translational Research Network	Mainehealth	3/10/25
U54GM115516-08S1	Northern New England Clinical and Translational Research Network - Equipment	Mainehealth	3/10/25
UH3DE030063	Investigating Behavioral Mechanisms and Efficacy of a Provider-Directed Intervention for HPV Vaccine Promotion in Real-World Dental Settings	Healthpartners Institute	3/10/25
R01AG089099	Social Networks and Cognitive Health among Black and Latino sexual minority men in NJ	Rutgers Biomedical And Health Sciences	3/11/25
R01DA058642	Testing a multistage model of risk factors for cannabis use utilizing a measurement burst design among sexual minority women, sexual minority reader diverse individuals, and between use women.	Ohio State University	3/11/25
R01HD075787-08S1	gender diverse individuals, and heterosexual women Social influences on sexual health among Latinx adolescents and emerging adults who identify as LGBTO+ in an agricultural community	Research Triangle Institute	3/11/25
R01NR020846	#TranscendentHealth - Adapting an LGB+ inclusive teen pregnancy	Center For Innovative Public Health	3/11/25
F31ES034972	prevention program for transgender boys Property events to phthelates and associations with doctational weight	Research Columbia University Health Sciences	3/12/25
13123034372	Prenatal exposure to phthalates and associations with gestational weight gain and fetal growth trajectories.	Columbia Oniversity nearth Sciences	5/12/25
F31ES035280	An equity-focused evaluation of a system-wide intervention to reduce mold	Columbia University Health Sciences	3/12/25
F31HD110257	in NYC public housing and its impact on asthma burden Does self-reported psychosocial stress in pregnancy mediate the association between maternal race/ethnicity and hypertensive disorders of	Columbia University Health Sciences	3/12/25
F31MD019521	pregnancy? A multi-level study of the link between fear of deportation and mental	University Of Houston	3/12/25
	health in Latinx young adults: The role of systemic inflammation and related risk and protective factors		
F31MH132290	Neighborhood Social Environment, Composition and Depression in Latinx	Columbia Univ New York Morningside	3/12/25
F31MH134699	Applying a multidimensional measure of human mobility to understand drivers of HIV incidence in Rakai, Uganda	Columbia University Health Sciences	3/12/25
F31MH138075	Intersectional Discrimination and Sexual Health Among Young Black Men who Have Sex with Men: A Mixed Methods Study	Duke University	3/12/25
F32AA029957	Understanding the individual and combined impact of childhood sexual abuse and minority stress on hazardous drinking among sexual minority women: Is emotion dysregulation a key factor?	Columbia University Health Sciences	3/12/25
F32MH135634	The psychological underpinnings of gender disparities in adolescent mental health	Princeton University	3/12/25
G13LM014176	Diversity in Practice: the Quest for Inclusion in Precision Medicine	Columbia University Health Sciences	3/12/25

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G13LM014426	Securing Health Equity: Philosophical Foundations for Equality and Social Justice in Public Health and Health Care	University Of Washington	3/12/25
K01MH120258	Youth-PRIDES: Implementing integrated, mHealth care for adolescent depressionwithin primary care clinics of Mozambique	Columbia University Health Sciences	3/12/25
K23AI150378	Harnessing Bioinformatics for HIV Prevention: Understanding Persistence in Comprehensive HIV Prevention Services	Columbia University Health Sciences	3/12/25
K23NS130143	Effect of pubertal hormones on Headache in Transmasculine Adolescents	University Of Colorado Denver	3/12/25
K24DA051328	Mentoring clinical investigators in patient-oriented research on substance use and HIV	Columbia University Health Sciences	3/12/25
P50MD019473	Igniting Hope in Buffalo New York Communities: Training the Next Generation of Health Equity Researchers	State University Of New York At Buffalo	3/12/25
R01AA030275	An intersectional approach linking Minority Stressors Experienced by Transgender and Gender Diverse Adults to Alcohol and Drug Use and comorbid Mental and Physical Health Outcomes	Georgia State University	3/12/25
R01CA253368	The linkage between Race, Kaiso and the tumor microenvironment in breast cancer health disparities	Columbia University Health Sciences	3/12/25
R01CA254576	Automated Digital Imaging for Cervical Cancer Screening	Columbia University Health Sciences	3/12/25
R01DA043512	Preventing Drug Abuse among Sexual-Minority Youth	Columbia Univ New York Morningside	3/12/25
R01DA045713	A Multi-site Multi-Setting RCT of Integrated HIV Prevention and HCV Care for PWID	Columbia University Health Sciences	3/12/25
R01DA054236	Project SMART: Social Media Anti-vaping Messages to Reduce ENDS Use Among Sexual and Gender Minority Teens	University Of Pennsylvania	3/12/25
R01DA054236-04S1	Project SMART: Social Media Anti-vaping Messages to Reduce ENDS Use Among Sexual and Gender Minority Teens	University Of Pennsylvania	3/12/25
R01DA061247	SILOS: Structural Inequities across Layers Of Social-Context as Drivers of HIV and Substance Use	Northwestern University At Chicago	3/12/25
R01DK122564-05S1	Skeletal Health in Youth with Type 1 Diabetes and Gender Diversity	Columbia University Health Sciences	3/12/25
R01HD092347-08S1	Views of Gender in Adolescence	Princeton University	3/12/25
R01HD094081	A Longitudinal Examination of Mechanisms Underlying Intersectional Health Disparities in the United States	University Of Minnesota	3/12/25
R01HD104599	Obesogenic origins of maternal and child metabolic health involving dolutegravir (ORCHID)	Columbia University Health Sciences	3/12/25
R01HG010868	Disability, diversity and trust in precision medicine research: stakeholdersengagement	Columbia University Health Sciences	3/12/25
R01MD013495	Health disparities, stress pathways, and stress-related comorbidities among MSM living with HIV	Johns Hopkins University	3/12/25
R01MD013554	Impact of Social Cohesion and Social Capital in PrEP Uptake and Adherence Among Transwomen of Color	Columbia University Health Sciences	3/12/25
R01MD016082	Efficacy of a Multi-level School Intervention for LGBTQ Youth	Washington University	3/12/25
R01MD016384	An Innovative, Prospective Model to Understand Risk and Protective Factors for Sexual Assault Experiences and Outcomes Among Sexual Minority Men	University Of Nebraska Lincoln	3/12/25
R01MD019178	A Multi-Level Trauma-Informed Approach to Increase HIV Pre-exposure Prophylaxis Initiation among Black Women	Johns Hopkins University	3/12/25
R01MD019956	Theoretically Informed Behavioral Intervention to Enhance QOL and Prevent HIV-related Comorbidities in Ethnic and Racial Sexual Minority Men	Yale University	3/12/25
R01MD020284	Measures of structural stigmatization and discrimination for HIV research with Latine sexual and gender minorities	Drexel University	3/12/25
R01MH116829	Building mobile HIV prevention and mental health support in low-resource settings	Columbia University Health Sciences	3/12/25
R01MH118004	A randomized trial of ImpACT+, a coping intervention to improve clinical and mental health outcomes among HIV-infected women with sexual trauma in South Africa	Columbia University Health Sciences	3/12/25
R01MH121194	Monitoring Microaggressions and Adversities to Generate Interventions for Change (MMAGIC) for Black Women Living with HIV	University Of Miami Coral Gables	3/12/25
R01MH121194-04S1	Monitoring Microaggressions and Adversities to Generate Interventions for Change (MMAGIC) for Black Women Living with HIV	University Of Miami Coral Gables	3/12/25
R01MH130166	Multilevel Racism & Discrimination and PrEP Outcomes Among Black SMM in the Southeastern U.S.	Us Helping Us, People Into Living, Inc.	3/12/25
R01MH133821	The Socioecology of Sexual Minority Stigma: Data Harmonization to Address Confounding Bias and Investigate Cross-Level MentalHealth Effects	San Diego State University	3/12/25
R01NR019417	Sex, Hormones and Identity affect Nociceptive Expression (SHINE)	University Of Alabama At Birmingham	3/12/25
R01NR020154-04S1	Exploring Stigma, Social Support, and Cancer Screenings among Sexual and Gender Diverse People Living with HIV in Georgia	Emory University	3/12/25
R01NR021691	Identifying multilevel facilitators of care outcomes among Positive Deviants to design an intervention for Black sexual minority men living with HIV	George Washington University	3/12/25
R03ES035509	Drinking water contaminants and fetal loss in Northern California	Columbia University Health Sciences	3/12/25

R13HD110322	International Workshops on HIV Pediatrics	Columbia University Health Sciences	3/12/25
R13MH138043	National LGBT Health Conference 2024	Emory University	3/12/25
R21AI171249	Multimodal immune profiling to determine mechanisms of COVID-19 clinical trajectory in Uganda	Columbia University Health Sciences	3/12/25
R21AI175747	Using wastewater surveillance data to study SARS-CoV-2 dynamics and predict COVID-19 outcomes	Columbia University Health Sciences	3/12/25
R21AI178913	Understanding the effects of cross-sex hormone therapy on vaginal mucosal immunity	Boston Medical Center	3/12/25
R21HD103053	mHealth and Mobile Ultrasound for Mothers	Columbia University Health Sciences	3/12/25
R21MD018509	Development and Pilot Evaluation of an Online Mentoring Program to Prevent Adversities Among Trans and Other Gender Minority Youth	University Of Nebraska Lincoln	3/12/25
R21MH127356	Investigating associations and mediating effects between climate and mental health and violence in informal settlements in Kenya	Columbia Univ New York Morningside	3/12/25
R21MH133755	The TAIL-PrEP Study: Acceptability and Feasibility of a Tailored Adherence Intervention for safe discontinuation of Long-acting PrEP	Columbia University Health Sciences	3/12/25
R21MH135489	Leveraging Latinx Adolescents, Photovoice, and Longitudinal Data to Disentangle the Bidirectional Effects of Social Media and Mental Health	Columbia University Health Sciences	3/12/25
R24DA061190	PRIDE-CARES Center: Patient-Responsive Initiatives for Diverse Engagement - LGBTQ+ Community Action in Research to Eliminate Substance Use Disorder	University Of South Carolina At Columbia	3/12/25
R25GM109435	PREP at University of Georgia	University Of Georgia	3/12/25
R25GM149980	Developing Modules to Address Microaggressions and Discriminatory Behaviors	Children's Hosp Of Philadelphia	3/12/25
R25HD074544	Fragile Families Summer Data Training Workshop Series 2021-2025	Columbia Univ New York Morningside	3/12/25
R25HG010857	Genomics Diversity Summer Program (GDSP) at Stanford	Stanford University	3/12/25
R25HL096260	BEST-DP: Biostatistics & Epidemiology Summer Training Diversity Program	Columbia University Health Sciences	3/12/25
R25MH080665	HIV Intervention Science Training Program for Underrepresented Investigators	Columbia Univ New York Morningside	3/12/25
R33TW011752	Preparing for pre-exposure prophylaxis implementation in Central-Eastern European Countries with low access to biomedical prevention	Columbia University Health Sciences	3/12/25
R34MH128163	Development and Testing of MyPEEPS Mobile for Young Transgender Men	Columbia University Health Sciences	3/12/25
R34MH136018	Development of a School-Based Prevention Intervention to Promote Adolescent Mental Health Equity	Boston College	3/12/25
R35GM157032	Molecular Mechanisms of Hormone-Mediated Sex Differences in Wound Healing	Brigham And Women's Hospital	3/12/25
R36DA058830 R56CA284564	Exploring Historical Trauma, Racial Discrimination, PTSD, and Substance Use Among Black Young Adults Gender-Affirming Testosterone Therapy on Breast Cancer Risk and	New School University Beth Israel Deaconess Medical Center	3/12/25
R61HD117134	Treatment Outcomes Supportive and restrictive factors and mental health in LGBT adolescent	Harvard Pilgrim Health Care, Inc.	3/12/25
T32AI106711	and young adult populations Columbia University Graduate Training Program in Microbiology and	Columbia University Health Sciences	3/12/25
	Immunology		
T32MH016434	Translational Research Training in Child Psychiatry	Columbia University Health Sciences	3/12/25
T32MH018870	Training in Schizophrenia and Psychotic Disorders: From Animal Models to Patients	Columbia University Health Sciences	3/12/25
T32MH019139	Behavioral Sciences Research in HIV Infection	Columbia University Health Sciences	3/12/25
T32MH020004	Research Training in Late-Life NeuroPsychiatric Disorders	Columbia University Health Sciences	3/12/25
T32MH126772	Culturally-focused HIV Advancements through the Next Generation for Equity (CHANGE) Training Program	University Of Miami School Of Medicine	3/12/25
U01HD108779	Unequal Parenthoods: Population Perspectives on Gender, Race, and Sexual Minority Disparities in Family Stress and Health During Crises	University Of Minnesota	3/12/25
U01MH125058	2/3 Genomics of Schizophrenia in the South African Xhosa	Columbia University Health Sciences	3/12/25
U54CA272171	Faculty Initiative for Improved Recruitment, Retention, and Experience (FIIRRE)	University Of South Carolina At Columbia	3/12/25
UM1TR004409	CTSA UM1 Program at University of Utah	University Of Utah	3/12/25
D43TW012189	Guyana Research in Injury and Trauma Training (GRITT) Program	Columbia University Health Sciences	3/14/25
	ENTRUST - economic navigation and strengthening to realize unrestricted services for transgender women	University Of Central Florida	3/14/25
		Harvard University	3/14/25
DP2MH132941	The Optics of Health: Race Skin Tone Minority Health and Health Disparities in the U.S.		
DP2DA058436 DP2MH132941 DP5OD031849	Disparities in the U.S. Public Drinking Water Contaminants and Infant Health: Advancing Environmental Justice	Columbia University Health Sciences	3/14/25
DP2MH132941 DP5OD031849 DP5OD037400	Disparities in the U.S. Public Drinking Water Contaminants and Infant Health: Advancing Environmental Justice The Behavioral Cost of Carbon	Columbia University Health Sciences Columbia University Health Sciences	3/14/25
DP2MH132941 DP50D031849	Disparities in the U.S. Public Drinking Water Contaminants and Infant Health: Advancing Environmental Justice	Columbia University Health Sciences	

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F3AH17851 Investigating the potential of wastrewater surveillance data to improve Columbia University Health Sciences 314/25 F3AH071324 Associations among material stress, infrat experiencies, and behavioral Columbia University Health Sciences 314/25 F3AH071320 Protocial Healthcare Methods of Trangencie and Cender Overse Acual Columbia University Health Sciences 314/25 F3AH071320 The Role of Social Determinasts in Regroductive Corection: Understanding Columbia University Health Sciences 314/25 F3AH071320 The Role of Social Determinasts in Regroductive Corection: Understanding Columbia University Health Sciences 314/25 F3AH071370 Accored Infravo Mediude Restreminants of Neurodopic Post acute Columbia University Health Sciences 314/25 F2AH171253 Evoluting the Egidemiology and Determinants of Neurodopic Post acute Columbia University Health Sciences 314/25 F2AH0425632 Evoluting the Egidemiology and Determinants of Neurodopic Post acute Columbia University Health Sciences 314/25 F2AH042563 Galdoner of Decary of Pencine (Columbia University Health Sciences 314/25 F2AH042563 Galdoner of Decary of Pencine (Columbia University Health Sciences 314/25 F2AH042563 Galdoner of Decary of Pencincine (Columbia University Health Sciences				
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R25HL161786 Summer Institute for Training in Biostatistics and Data Science at Columbia University Health Sciences 3/14/25	R25ES036012		Columbia University Health Sciences	3/14/25
	R25HL156002	Training in Cardiovascular Sciences for Under Represented Students	Columbia University Health Sciences	3/14/25
	R25HL161786		Columbia University Health Sciences	3/14/25

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R25NS130961	CADRE Program for Postbaccalaureate Training in the Neurosciences	Columbia University Health Sciences	3/14/25
R33CA253604	SEARCH: SMS Electronic Adolescent Reminders for Completion of HPV vaccination- Uganda	Columbia University Health Sciences	3/14/25
R36DA061635	Dissecting the role of loneliness on substance use- and HIV-related outcomes among sexual minority men in the United States and Canada	Columbia University Health Sciences	3/14/25
R56AI182347	Doxy4STICare - Doxycycline for Sexually Transmitted Infections; A Comprehensive Assessment of Antimicrobial Resistance and Engagement	Columbia University Health Sciences	3/14/25
R61DA058985	Structural Racism, Neurocognition in Reward Related Decision Making and Substance Use Risk	Columbia University Health Sciences	3/14/25
T32DK007328	Hormones: Molecular Mechanism of Action and Functions	Columbia University Health Sciences	3/14/25
T32GM141882	Genetic Approaches to Development and Disease	Columbia University Health Sciences	3/14/25
T32MH128395	Social Determinants of HIV	Columbia University Health Sciences	3/14/25
T32NR007969	Reducing Health Disparities Through Informatics	Columbia University Health Sciences	3/14/25
T35HL007616	Short Term Training Grant	Columbia University Health Sciences	3/14/25
U01DK130058	India - Factors of CKDu in Uddanam Study (India-FOCUS)	Columbia University Health Sciences	3/14/25
U01NS135533	The SDOH-Homecare Intervention Focus Team (SHIFT) Trial to Mitigate SDOH in Stroke Outcomes and Build Community Capacity	Columbia University Health Sciences	3/14/25
U2RTW012123	Advancing Public Health Research in Eastern Africa through Data Science Training (APHREA-DST)	Columbia University Health Sciences	3/14/25
U54HD113172	NY Community-Hospital-Academic Maternal Health Equity Partnerships (NY-CHAMP)	Columbia University Health Sciences	3/14/25
F31AA031605	A Mixed Methods Study to Enhance Alcohol Treatment Help-seeking and Engagement Among Gender Diverse Adults	University Of Memphis	3/18/25
F31AA031618	Post-Traumatic Stress and Alcohol Use as Mechanisms Explaining IPV Among Bisexual Women Who Disclose Sexual Violence to Partners: Examining Minority Stress as a Moderator	University Of Nebraska Lincoln	3/18/25
F31AI181431	Prevention of Chlamydia trachomatis infections: Evaluation of vaccination and post-exposure prophylactic antibiotic use as population-level strategies	University Of Washington	3/18/25
F31DA062473	Social safety as a novel mechanism of risk for problematic substance use among sexual and gender minority youth	Univ Of North Carolina Chapel Hill	3/18/25
F31MD019985	Characterizing Economic Determinants of Violence and Safety Disparities Among Sexual and Gender Diverse Populations	Johns Hopkins University	3/18/25
F31MH134720	Understanding Patient Level Implementation Determinants Related to Long-acting Injectable HIV Pre-Exposure Prophylaxis among Young Men Who Have Sex with Men Living in Rural Areas	Medical College Of Wisconsin	3/18/25
F31MH136729	Determining the role of discrimination in clinical presentation and treatment response among sexual minority people with OCD: A machine learning approach	Fordham University	3/18/25
F31MH136856	Aligning HIV services with gender diverse community priorities through person-centered care: a mixed methods study in India	Johns Hopkins University	3/18/25
F31MH138212	Exploring Acceptability & Potential Reach of Game-Based & Social Network Strategies for Improving PrEP & HIV Self-Testing Uptake among Latinx Sexual Minority Men Living in an EHE Priority Jurisdiction	University Of Miami School Of Medicine	3/18/25
F31MH139225	Structural Stigma and Mental Health Among Transgender and Gender Diverse Adults Living in the Rural United States	Johns Hopkins University	3/18/25
F31MH139392	HIV risk messaging and medical mistrust in the era of Undetectable=Untransmittable: Psychosocial and Behavioral Implications among Black, Latino/a/e/x, and Multiracial Sexual and Gender Minorities	George Washington University	3/18/25
F31NR021243	Intergenerational and Cultural Drivers of Depressive Symptoms in Hispanic Sexual Minority Youth	University Of Miami Coral Gables	3/18/25
F31NR021247	Client and clinician priorities for same-day PrEP and DoxyPEP awareness, uptake, and persistence in primary care.	Ohio State University	3/18/25
F32MH138253	Training in Behavioral Design Interventions to Address Stigma among Men Who have Sex with Men	Yale University	3/18/25
K23MH134111 K23MH137389	Using youth-engaged methods to develop and evaluate a measure for disordered eating behaviors in transgender and gender-diverse youth	Virginia Commonwealth University	3/18/25
K43TW012850	ALIVE: Development and feasibility of a psychosocial intervention for sexual and gender minority autistic adults Adapting an evidence-based intervention to improve HIV testing and PrEP	Hunter College Hanoi Medical University	3/18/25
T32MH130325	uptake among young men who have sex with men in Vietnam Training Program in Translational Science, HIV, and Sexual and Gender	Northwestern University At Chicago	3/18/25
F31AA031420	Minority Health Examining Proximal Associations between Minority Stress, PTSD Symptoms, and Alcohol Use among Bi+ College Students with Trauma	University Of Tennessee Knoxville	3/19/25
K23DK139454	Histories Structural Racism as a "Third hit" on kidney outcomes of Black individuals with APOL1 risk alleles	Icahn School Of Medicine At Mount Sinai	3/20/25
P2CHD058486	Columbia Population Research Center	Columbia Univ New York Morningside	3/20/25
P50MD019475	The Institute for Health Equity Research Catalyst Center	Icahn School Of Medicine At Mount Sinai	3/20/25

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R01AA031637	The Role of Local Structural Stigma in Alcohol Related Inequities among SGM Young Adults	Pacific Institute For Res And Evaluation	3/20/25
R01AI145675	Improving PrEP protection of transgender women through mechanistic pharmacokinetic understanding	Johns Hopkins University	3/20/25
R01AI154541	Sex, Gender and the Immunopathogenesis of HIV	Johns Hopkins University	3/20/25
R01AI169643	FINISHING HIV: An EHE model for Latinos Integrating One-Stop-Shop PrEP Services, a Social Network Support Program and a National Pharmacy Chain	University Of Miami School Of Medicine	3/20/25
R01AI172092	Enhanced COhort methods for HIV Research and Epidemiology (ENCORE) among transgender women in the United States	Johns Hopkins University	3/20/25
R01AI172469	Examining Social Ecological and Network Factors to Assess Epidemiological Risk in a Large National Cohort of Cisgender Women	Columbia University Health Sciences	3/20/25
R01AI174862	Cabotegravir PrEP: Actionable Robust Evidence for Translation into Practice (CABARET)	Harvard Pilgrim Health Care, Inc.	3/20/25
R01Al181732	The Doxy-PEP Impact Study: a multi-city US longitudinal cohort to evaluate doxy-PEP field effectiveness, investigate associated antimicrobial resistance, and establish doxy-PEP to need ratios	University Of California, San Francisco	3/20/25
R01AI186641	Randomized Directly Observed Therapy Study to Interpret Clinical Trials of Doxy-PEP	University Of California, San Francisco	3/20/25
R01AI189309	Impact of Gender Affirming Hormone Therapy on HIV Viral Dynamics and Immune Responses in Transgender Women	Johns Hopkins University	3/20/25
R01CA237670	Project RESIST: Increasing Resistance to Tobacco Marketing Among Young Adult Sexual Minority Women Using Inoculation Message Approaches	University Of Pennsylvania	3/20/25
R01CA253244	HPV Oropharyngeal cancer and screening in Gay and Bisexual Men	University Of Minnesota	3/20/25
R01CA265945	Testing Effective Methods to Recruit Sexual and Gender Minority Cancer Patients for Cancer Studies	University Of Minnesota	3/20/25
R01CA276500	Smoking and Cancer-Related Health Disparities among Sexual and Gender Minority Adults	University Of Michigan At Ann Arbor	3/20/25
R01CA285198	Screening strategies and social determinants of health among people with high risk of anal cancer	Emory University	3/20/25
R01DA045773	Reducing Black Men's Drug Use and Co-Occurring Negative Mental and Physical Health Outcomes: Intersectionality, Social-Structural Stressors, and Protective Factors	George Washington University	3/20/25
R01DA052016	Substance use and DNA methylation at the intersection of sex and gender	University Of California, San Francisco	3/20/25
R01DA056888	Optimizing PrEP Implementation and Cost-effectiveness among Sexual and Gender Minority Individuals with a Substance Use Disorder	Friends Research Institute, Inc.	3/20/25
R01DA057351	Heavy cannabis use, neurocognition and PrEP care engagement among young Black sexual minority men	University Of Chicago	3/20/25
R01DA057351-03S1	Heavy cannabis use, neurocognition and PrEP care engagement among young Black sexual minority men	University Of Chicago	3/20/25
R01DA058965	Achieving Equity in Patient Outcome Reporting for Timely Assessments of Life with HIV and Substance Use (ePORTAL HIV-S)	University Of Chicago	3/20/25
R01DA058994	Network-based study design, statistical, and modeling solutions for HIV among populations that use illicit substances: Informing interventions and policy in real-world settings using existing data	University Of Rhode Island	3/20/25
R01DA059240	Characterizing Intersectional Geospatial Stigma and Affirmation Landscapes and Their Influence on Black and Latino Bisexual Men At Risk for Substance Abuse and HIV	Florida State University	3/20/25
R01DA061345	Race & Place: The Impacts of Racial Inequality on Substance Use and HIV Outcomes in Los Angeles	University Of California Los Angeles	3/20/25
R01DA061661	Optimizing a Just-in-Time Adaptive Intervention to Increase Uptake of Chemsex Harm Reduction Services in MSM: A Micro-randomized Trial	University Of Connecticut Storrs	3/20/25
R01DC020061	Effects of exogenous testosterone therapy on communication in gender diverse speakers	Boston University (Charles River Campus)	3/20/25
R01DE032225	The Role of Testosterone on Mediating Sex and Gender Influences on Chronic Orofacial Pain Conditions	University Of Maryland Baltimore	3/20/25
R01ES036258	Reframing personal and community report back of consumer products by centering intersectionality	Columbia University Health Sciences	3/20/25
R01HD100180	Female Sexual Orientation GWAS	Endeavor Health Clinical Operations	3/20/25
R01HD101421	Skeletal Health and Bone Marrow Composition Among Youth	Boston Children's Hospital	3/20/25
R01HD112418	Long-term trajectories of psychosocial functioning among transgender youth and their parents.	Ut Southwestern Medical Center	3/20/25
R01HD114134	Equitable Measurement of Care Disparities and Needs in Intersex Youth/Youth with Variations in Sex Development	Children's Research Institute	3/20/25
R01HG012697	A novel approach for equitable characterization of gender and its use in exposing subgroup discrepancies in polygenic score associations	University Of Iowa	3/20/25
R01HG013145	Trans/Forming Genomics: Guidance for Research Involving Transgender and Gender Diverse People	Icahn School Of Medicine At Mount Sinai	3/20/25
R01HL149778	Cardiovascular Health of Sexual and Gender Minorities in the Hispanic Community Health Study/Study of Latinos (SGM HCHS/SOL)	Univ Of North Carolina Chapel Hill	3/20/25
R01HL160326	Stigma and the non-communicable disease syndemic in aging HIV positive and HIV negative MSM	Rutgers Biomedical And Health Sciences	3/20/25

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R01HL165686	Synergistic epidemics of non-communicable diseases, stigma,	University Of Maryland Baltimore	3/20/25
	depression, and material insecurities among sexual and gender minorities living with HIV in Nigeria		0/20/20
R01LM013301	UnBIASED: Understanding Biased patient-provider Interaction And Supporting Enhanced Discourse	University Of Washington	3/20/25
R01MD014722	Still Climbin': A Randomized Controlled Trial of an Intervention to Improve Coping with Discrimination, Address Medical Mistrust, and Reduce Health Disparities among Black Sexual Minority Men	Rand Corporation	3/20/25
R01MD015109	Charting Trajectories of Sexual Identity Development and Mental Health Disparities Among Sexual Minority Youth	Univ Of North Carolina Chapel Hill	3/20/25
R01MD016417	Contextual Determinants of Sexual Minority Health in the United States	University Of Texas San Antonio	3/20/25
R01MD018051	Modeling Resilience as a Multidimensional Protective Factor for Transgender Health Disparities: Measure Development and Longitudinal Evaluation of Resilience	Michigan State University	3/20/25
R01MD018167	Sexual minority couples' health during the transition to marriage	University Of Denver (Colorado Seminary)	3/20/25
R01MD018340	Investigating and identifying the heterogeneity in COVID-19 misinformation exposure on social media among Black and Rural communities to inform precision public health messaging	University Of Pennsylvania	3/20/25
R01MD018523	A Multilevel, Multiphase Optimization Strategy for PrEP: Patients and Providers in Primary Care	Henry Ford Health + Michigan State University Health Sciences	3/20/25
R01MD018571	A multidimensional investigation of social support for transgender and nonbinary people and its impacts on health and well-being: Measurement development using community engagement	University Of Wisconsin-Madison	3/20/25
R01MD018679	Understanding the Role of Structural Oppression for Suicide Risk among Black Sexual and Gender Minority Adolescents and Young Adults	Rutgers Biomedical And Health Sciences	3/20/25
R01MD019181	MyPEEPS Mobile Plus: A Multi-Level HIV Prevention Intervention for Young MSM¬t	Columbia University Health Sciences	3/20/25
R01MD019278	Examining the Mechanisms and Consequences of Sleep Health Inequities Affecting Black Sexual Minority Men	Rand Corporation	3/20/25
R01MH100028	Autism Center of Excellence Network: Neurodevelopmental Biomarkers of Late Diagnosis in Female and Gender Diverse Autism	University Of Virginia	3/20/25
R01MH115349	Sex hormone effects on neurodevelopment: Controlled puberty in transgender adolescents	Stanford University	3/20/25
R01MH115765	A couples-based approach to HIV prevention for transgender women and their male partners	University Of Michigan At Ann Arbor	3/20/25
R01MH118245	Biopsychosocial mechanisms underlying internalizing psychopathology in a prospective, population-based cohort of sexual minority young adults	Yale University	3/20/25
R01MH119015	Addressing the continuum of care among high-risk Thai men	Mahidol University	3/20/25
R01MH119956	PrEP-3D: An Integrated Pharmacy Digital Diary and Delivery Strategy to Increase PrEP Use Among MSM	Public Health Foundation Enterprises	3/20/25
R01MH121256	Promoting Reductions in Intersectional Stigma to Improve HIV Testing and PrEP Use Among Latino Sexual Minority Men	Rand Corporation	3/20/25
R01MH123282	NEXUS: A novel social network approach to study the effects of	University Of California, San Diego	3/20/25
R01MH123349	intersectional stigma on HIV prevention among Latino MSM Social and structural violence and HIV care continuum outcomes: Developing a trauma-informed HIV care intervention among WLWH	University Of British Columbia	3/20/25
R01MH123388	Violence and viral suppression among men living with HIV	University Of Michigan At Ann Arbor	3/20/25
R01MH123746	THE IMPACT OF PUBERTAL SUPPRESSION ON ADOLESCENT NEURAL AND	Research Inst Nationwide Children's	3/20/25
	MENTAL HEALTH TRAJECTORIES - Resubmission - 1	Hosp	
R01MH124900	Social-Affective Vulnerability to Suicidality among LGBTQ Young Adults: Proximal and Distal Factors	University Of Pittsburgh At Pittsburgh	3/20/25
R01MH125727	PrEParados: A Multi-Level Social Network Model to Increase PrEP Enrollment by Latino MSM Self-Identified as Gay, Bisexual	University Of Miami School Of Medicine	3/20/25
R01MH128049	Tcher, Take Charge: Increasing PrEP Awareness, Uptake, and Adherence Through Health Care Empowerment and Addressing Social Determinants of Health Among Racially Diverse Trans Women in the Deep South	Public Health Foundation Enterprises	3/20/25
R01MH128130	STI Response and Recommendations Under PrEP (STIRRUP)	Emory University	3/20/25
R01MH131475	Intervention to Enhance PrepPersistence Among African American Men Who Have Sex With Men	Brown University	3/20/25
R01MH132147	Scaling Up Implementation Strategies to Improve the DIAGNOSE and PREVENT Pillars for Young MSM in Florida	Florida State University	3/20/25
R01MH132692	Young Sexual Minority Women's Mental Health: Developmental Trajectories, Mechanisms of Risk, and Protective Factors.	University Of Cincinnati	3/20/25
R01MH137695	Measuring and Mapping Trajectories of Risk and Resilience for Suicidal Thoughts and Behaviors in Sexual and Gender Minority Preteens	Vanderbilt University	3/20/25
R01MH138237	Leveraging a Strategic Alliance of Community-Based Implementers and	University Of Miami Coral Gables	3/20/25
	Researchers to Characterize, Protocolize, and Scale Up Local Implementation Strategies for Ending the HIV Epidemic among Latino MSM		
R01MH138335	Bisexual adolescents' and young adults' risk for depression and suicidal ideation: Developmental trajectories, risk and protective factors, and underlying mechanisms	Ohio State University	3/20/25

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R01MH140023	Mental Health Effects of Marriage Policy: Evidence from Linked	Vanderbilt University	3/20/25
R01NR021461	Administrative Data in New Zealand Examining Non-Congregate Shelter Effects on Mental Health Crises	Yale University	3/20/25
R03AA031740	through Community Health Partnerships in Connecticut Romantic Relationships, Discrimination Stressors, and Alcohol Use among Sexual and Gender Minority Adults	Montana State University - Bozeman	3/20/25
R03CA289560	Refinement of a Training Module to Improve Discussions of Sexual Orientation and Gender Identity in Cancer Clinics	Mayo Clinic Rochester	3/20/25
R13AI188929	2025 Sex Differences in Immunity Gordon Research Conference and Gordon Research Seminar	Gordon Research Conferences	3/20/25
R13HD117635	Be Curious, Not Judgmental: The 4th National Symposium on Sexual Behavior of Youth	University Of Oklahoma Hlth Sciences Ctr	3/20/25
R13HL177880	2025 Cardiac Arrhythmia Mechanisms Gordon Research Conference and Gordon Research Seminar	Gordon Research Conferences	3/20/25
R13MH136663	Enhancing Diversity, Equity, and Inclusion in Mental Health Research: American Psychopathological Association Annual Meetings	New York State Psychiatric Institute Dba Research Foundation For Mental Hygiene, Inc	3/20/25
R15AA030898	Reconstruction of an SGM-specific sexual violence peer support program (SSS+)	University Of North Carolina Charlotte	3/20/25
R21AA031548	Daily Impact of Sexual Minority Stress on Alcohol-Related Intimate Partner Violence among Bisexual+ Young Adults: A Couples' Daily Diary Study	Virginia Polytechnic Inst And St Univ	3/20/25
C06OD034040	Developing a Community-Based Facility to Support Next Generation Biomedical HIV Research	Whitman-Walker Institute, Inc.	3/21/25
C06OD034042	Meharry HIV/AIDS Research and Training Facility	Meharry Medical College	3/21/25
D43TW011324	Malaysian Implementation Science Training (MIST) Program in HIV	Yale University	3/21/25
D43TW012274	Integrated Networks of Scholars in Global Health Research Training (INSIGHT)	University Of Maryland Baltimore	3/21/25
DP2MH132938	Transdiagnostic Intervention to Reduce Internalized Health-Related Stigma	University Of Florida	3/21/25
DP2MH132938-01S1	Assessing Internalized Health-Related Stigma in Spanish-Speaking Latino Adults	University Of Florida	3/21/25
F31AA030722	Examining differential effects of state equality-promoting policies on harmful alcohol use among sexual and gender minority adults in the U.S.: an econometrics approach for causal inference	University Of California, San Francisco	3/21/25
F31CA271474	Low Dose Computed Tomography (LDCT) Eligibility and Outcome differences between Sexual and Gender Minorities and their Sexual and Gender Majority Counterparts	University Of Michigan At Ann Arbor	3/21/25
F31DA059345	Minority Stress, Stimulant Use, and HIV among Sexual Minority Men: A Biopsychosocial Approach	San Diego State University	3/21/25
F31MH132187	Applying Computational Phenotypes To Assess Mental Health Disorders Among Transgender Patients in the United States	Univ Of North Carolina Chapel Hill	3/21/25
F31MH133472	Identifying preferences for receiving HIV prevention services among GBMSMs and for providing HIV prevention services among HCPs who are active-duty service members	Florida International University	3/21/25
F31MH135787	Extending the Prevention Toolbox: Exploring the Acceptability and Impact of Long-acting Injectable PrEP among MSM in Baltimore: A Pilot Study	Johns Hopkins University	3/21/25
F31MH135828	Employment as prevention: Adapting a structural intervention to achieve HIV equity among immigrant Latino MSM.	University Of Miami School Of Medicine	3/21/25
F31NR020760	Interpersonal Protective Factors and Mental Health Symptom Self- Management Among Black Transgender Women: A Mixed-Methods Study	Johns Hopkins University	3/21/25
F32AA030194	Sexual orientation, gender identity, and alcohol use: A multi-method analysis of developmental differences and key mechanisms	Univ Of Maryland, College Park	3/21/25
F32MD017452	Sexual Minority Mental Health During the COVID-19 Pandemic: An Intersectional, Social Epidemiologic Investigation	Boston Children's Hospital	3/21/25
G13LM013533	The Use of Diversity: Managing Race and Representation in Law, Politics, and the Biosciences	Northeastern University	3/21/25
K01HL151902	Building methods to assess and address cardiovascular health in transgender adults	Boston Medical Center	3/21/25
K01HL151902-04S1	Assessing the burden of dementia in transgender populations	Boston Medical Center	3/21/25
K01MH116737-06S1	COVID-19 Administrative Supplement to K01: Adapting, Pilot Testing a Behavioral Intervention to Incorporate Advances in HIV Prevention for Black Young MSM in Alabama	Florida State University	3/21/25
K01MH117142-05S1	Biological Mechanisms of Suicidal Behavior among Sexual Minority Adolescents - Supplement	University Of Pittsburgh At Pittsburgh	3/21/25
K01MH130270	Intersectional minority stress, mental health, and HIV treatment and care among MSM living with HIV in Ghana	State University Of New York At Buffalo	3/21/25
K01MH134764	Intersectional discrimination and linkage to HIV prevention and care in transgender women in Ecuador	Whitman-Walker Institute, Inc.	3/21/25
K08CA276706	Understanding Breast Cancer Risk and Screening in Transgender Persons through a Pilot Breast Cancer Screening Program	Medical College Of Wisconsin	3/21/25
K08MD019314	Predicting acute and dynamic suicide risk in rural sexual minorities	University Of Oregon	3/21/25

K12AR084219-26S1	UCSF-Kaiser Department of Research Building Interdisciplinary Research Careers in Women's Health (BIRCWH) Program	University Of California, San Francisco	3/21/25
K12AR084220-21S1	Building Interdisciplinary Research Careers in Women's Health at UC Davis	University Of California At Davis	3/21/25
K12HD000850	Pediatric Scientist Development Program	Weill Medical Coll Of Cornell Univ	3/21/25
K12HD103084	Stanford Women's Reproductive Health Research Career Development Program	Stanford University	3/21/25
K99MD019060	A digital health intervention to increase condom use among adolescent sexual minority males	Trustees Of Indiana University	3/21/25
P01HD109850	A longitudinal study investigating TDM and adolescent health and development: Brain, Behavior and well-Being	University Of Wisconsin-Madison	3/21/25
P20GM135007	Vermont Center for Cardiovascular and Brain Health	University Of Vermont & St Agric College	3/21/25
P30CA016056-47S1	Two-Spirit Films in Indigenous Cancer Health	Roswell Park Cancer Institute Corp	3/21/25
P50MD017349	Chicago Chronic Condition Equity Network (C3EN)	University Of Chicago	3/21/25
P50MD017349-03S1	Chicago Chronic Condition Equity Network (C3EN)	University Of Chicago	3/21/25
P50MH126283	ALACRITY for Early Screening and Treatment of High Risk Youth (eSToRY)	Cambridge Health Alliance	3/21/25
R00AA028049	A mixed-methods approach to understanding stress and hazardous drinking among same-sex female couples	Northwestern University At Chicago	3/21/25
R00AA030079	Event-level Antecedents of Heavy Drinking Among Bisexual and Heterosexual Women with and without Histories of Sexual Assault	Rhode Island Hospital	3/21/25
R00AA030601	Stigma, Romantic Relationships, and Alcohol Use Among Transgender and Nonbinary Young Adults	Boston University Medical Campus	3/21/25
R00CA260718	Testing the effect of anti-tobacco message framing on polytobacco use in lesbian, gay, bisexual, and transgender young adults	Ohio State University	3/21/25
R00DA055508	A Gender-Affirming Stigma Intervention to Improve Substance Misuse and HIV Risk among Transgender Women	Illinois Institute Of Technology	3/21/25
R00MD015770	Population-Specific Eating Disorder Risk Factors in Sexual Minority Women	University Of Colorado Denver	3/21/25
R00MD017967	Sexually Transmited Infection Testing Risk and Prevention among Trans Women (STRIP-T)	University Of Central Florida	3/21/25
R01AA027248	Alcohol, minority stress, and intimate partner violence: Temporal and prospective associations in sexual minority young adults	University Of Wisconsin Milwaukee	3/21/2
R01AA027252	Stress, hazardous drinking and intimate partner aggression in a diverse sample of women and their partners	Columbia University Health Sciences	3/21/2
R01AA028810	Peer Victimization and Risky Alcohol Use among Sexual Minority Youth: Understanding Mechanisms and Contexts	State University Of New York At Buffalo	3/21/25
R01AA029044	Intersectional Approaches to Population-Level Health Research: Role of HIV Risk and Mental Health in Alcohol Use Disparities among Diverse Sexual Minority Youth	Northwestern University At Chicago	3/21/25
R01AA029044-04S1	Intersectional Approaches to Population-Level Health Research: Role of HIV Risk and Mental Health in Alcohol Use Disparities among Diverse Sexual Minority Youth	Northwestern University At Chicago	3/21/25
R01AA029076	Project Recognize: Improving Measurement of Alcohol Use and Other Disparities by Sex, Sexual Orientation, and Gender Identity through Community Engagement	Northwestern University At Chicago	3/21/25
R01AA029076-04S1	Improving Measurement of Alcohol Use and Other Disparities by Sex, Sexual Orientation, and Gender Identity through Community Engagement	Northwestern University At Chicago	3/21/25
R01AA029088	A unified protocol to address sexual minority women's minority stress, mental health and hazardous drinking	Yale University	3/21/25
R01AA029989	Long-term and Daily Associations among Intersectional Minority Stress, Structural Oppression, and Alcohol Use and Misuse among Sexual Minority Adolescents of Color	Univ Of Maryland, College Park	3/21/25
R01AA030017	A Randomized Controlled Trial of a Game-Based Intervention to Reduce Alcohol Use among Sexual and Gender Minority Youth	University Of Pittsburgh At Pittsburgh	3/21/25
R01AA030243	Sexual Fluidity and Longitudinal Changes in Alcohol Misuse and Associated Health Consequences	University Of Michigan At Ann Arbor	3/21/25
R01AA030558	Experiences of Rural Sexual and Gender Minority Couples: Does Alcohol Use Explain the Link Between Minority Stress and Intimate Partner Discord and Violence	University Of Nebraska Lincoln	3/21/25
R01AA031175	Feasibility and Effectiveness of Gamified Digital Intervention to Prevent Alcohol and Mental Health Risks	Loyola Marymount University	3/21/25
R01AA031213	The Impact of Minority Stress on Alcohol-Related Sexual Assault among Sexual Minority College Students: An Intersectional, Mixed-Methodological Study	University Of Wisconsin Milwaukee	3/21/25
R01AG060944	The All-or-Nothing Marriage? Marital Functioning and Health Among Individuals in Same and Different-Gender Marriages	University Of Minnesota	3/21/25
R01AG063954	Establishing the science behind Alzheimer's recruitment registries: opportunities for increasing diversity and accelerating enrollment into trials	Banner Health	3/21/25
R01AG069003	Looking Back to Look Forward: Social Environment Across the Life Course, Epigenetics, and Birth Outcomes in Black Families	Univ Of North Carolina Chapel Hill	3/21/25

R01AG069041	Social Convoys, Cognitive Reserve and Resilience, and Risk for Alzheimer's Disease and Related Dementias	New York State Psychiatric Institute Dba Research Foundation For Mental Hygiene, Inc	3/21/25
R01AG070059	Sampling Strategies and Measure Development for the LGBT Aging Project (SAMLAP)	National Opinion Research Center	3/21/25
R01AG072592	Cerebral small vessel disease burden and racial disparity in vascular cognitive impairment and Alzheimer, Äôs disease and its related dementias	University Of Cincinnati	3/21/25
R01AG073440	Examining Health Comorbidities and Healthcare Utilization Disparities among Older Transgender and Cisgender Adults in the U.S.	Brown University	3/21/25
R01AG075734-03S1	Training the Long-Term Services and Supports Dementia Care Workforce in Provision of Care to Sexual and Gender Minority Residents	University Of Minnesota	3/21/25
R01AG077934	Structural Racism and Discrimination in Older Men's Health Inequities	University Of California, San Francisco	3/21/25
R01AG082080	Improving Inclusivity of Alzheimer,Äôs Disease and Related Dementias Research for Asian Americans and Latinx through Nationally Representative Hybrid Sampling.	University Of Michigan At Ann Arbor	3/21/25
R01AG083177	Enhancing Measurement and Characterization of Roles and Experiences of Sexual and Gender Minority Caregivers of Persons living with Alzheimer's Disease and Related Dementias	University Of Nevada Las Vegas	3/21/25
R01AG087121	ADRD risk and resilience among Black Americans: A 20-year longitudinal study	University Of Michigan At Ann Arbor	3/21/25
R01AI169636-03S1	ED2PrEP - patient focused, low-burden strategies for PrEP uptake among emergency departments patients: a cross-over hybrid implementation- effectiveness trial	Albert Einstein College Of Medicine	3/21/25
R01CA276594-02S1	Randomized Controlled Trial of Dyadic Financial Incentive Treatment for Dual Smoker Couples: Evaluation of Efficacy, Mechanisms, and Cost Effectiveness	University Of Oklahoma HIth Sciences Ctr	3/21/25
R01DA056235	Structural Influences on Methamphetamine Use among Black Gay and Bisexual Men in Atlanta	Emory University	3/21/25
R01DA056287	Comparative- and cost-effectiveness research determining the optimal intervention for advancing transgender women living with HIV to full viral suppression	Friends Research Institute, Inc.	3/21/25
R01DA059022	The Collaborative Care PrTNER (Prevention, Treatment, Navigation, Engagement, Resource) Project	Children's Hosp Of Philadelphia	3/21/25
R01DA059480	Elucidating minority stress influences on tobacco use at the intersection of sexual orientation and rurality	University Of Oklahoma Hlth Sciences Ctr	3/21/25
R01DK130864-03S1	The role of circulating meta-inflammatory monocytes in adolescent insulin resistance	University Of Michigan At Ann Arbor	3/21/25
R01GM155395	Promoting Inclusive Excellence	University Of Pittsburgh At Pittsburgh	3/21/25
R01HD109320	Advancing novel survey tools to increase participation and improve sexual and reproductive health data quality	Ibis Reproductive Health	3/21/25
R01HD109320-02S1	Advancing novel survey tools to increase participation and improve sexual and reproductive health data quality	Ibis Reproductive Health	3/21/25
R01HD111516	Intervention to improve parent communication about sexuality with sexual minority male adolescents	University Of Pennsylvania	3/21/25
R01HD112464	Health and economic consequences of changing federal and state policies on reproductive health.	University Of California, San Francisco	3/21/25
R01HD115551	Understanding multilevel predictors affecting family formation among sexual and gender minority couples	Northwestern University At Chicago	3/21/25
R01HD115921	The effects of gender-affirming sex steroids on brain development in adolescents	Boston Children's Hospital	3/21/25
R01HL169503	Geographically-Explicit Ecological Momentary Assessment Protocol to Assess the Linkages Between Intersectional Discrimination and CVD Risk Among Sexual and Gender Minorities	New York University	3/21/25
R01HL177518	Cardiometabolic Impact of Gender-Affirming Hormone Therapy in Transmasculine Young Adults	Medical College Of Wisconsin	3/21/25
R01MD013907-05S1	A culturally centered CBT protocol for suicidal ideation and suicide attempts among Latinx youth	Emma Pendleton Bradley Hospital	3/21/25
R01MD015256	Sexual orientation-related disparities in obstetrical and perinatal health	Harvard Pilgrim Health Care, Inc.	3/21/25
R01MD015256-05S1	Improving service delivery models of medically assisted reproduction: A patient journey mapping study of sexual minority women couples' experience of medicalized family formation	Harvard Pilgrim Health Care, Inc.	3/21/25
R01MD015722	Adolescent health at the intersections of sexual, gender, racial/ethnic, immigrant identities and native language	University Of Minnesota	3/21/25
R01MD017085	Social Connectedness and Health among Gender Minority People of Color	Columbia University Health Sciences	3/21/25
R01MD017573	Sexual Assault Recovery Among Sexual Minority Women: A Longitudinal, Multi-Level Study	University Of Washington	3/21/25
R01MD017588	Promoting Health and Reducing Risk among Hispanic Sexual Minority Youth and their Families	University Of Miami Coral Gables	3/21/25
R01MD018582	Psychosocial Predictors of Risk for Suicidal Behavior Among Gender Minority Adolescents	University Of Pittsburgh At Pittsburgh	3/21/25
R01MD019029	Assessing intersectional, multilevel and multidimensional structural racism for English- and Spanish-speaking populations in the US	University Of Maryland Baltimore	3/21/25

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R01MD019029-02S1	Assessing intersectional, multilevel and multidimensional structural racism for English- and Spanish-speaking populations in the US	University Of Maryland Baltimore	3/21/25
R01MH127014-03S1	Dopamine Availability and Developmental Pathways of Adolescent Depression and Anhedonia - Administrative Supplement	University Of Pittsburgh At Pittsburgh	3/21/25
R01MH129175	Strategies to Prevent HIV Acquisition Among Transgender MSM in the US	University Of Michigan At Ann Arbor	3/21/25
R01MH129285	A multi-level approach to improve HIV prevention and care for transgender women of color	New York State Psychiatric Institute Dba Research Foundation For Mental Hygiene, Inc	3/21/25
R01MH130208	Choice-Based PrEP Delivery for Transgender People in Uganda	Infectious Diseases Institute	3/21/25
R01MH130375	A longitudinal and experience sampling investigation of rejection sensitivity and its role in sexual minority adolescents' mental health	Rosalind Franklin Univ Of Medicine & Sci	3/21/25
R01MH130675	1/4 Asian Bipolar Genetics Network (A-BIG-NET)	Broad Institute, Inc.	3/21/25
R01MH133543	Implementing sustainable evidence-based mental healthcare in low- resource community settings nationwide to advance mental health equity for sexual and gender minority individuals	Yale University	3/21/25
R01MH134051	A Strengths-Based, Intersectional Approach to Suicide Prevention Among Black Sexual and Gender Minority Youth	University Of Central Florida	3/21/25
R01MH134176-02S1	Effect of Medicaid Accountable Care Organizations on Behavioral Health Care Quality and Outcomes for Children	University Of Massachusetts Amherst	3/21/25
R01MH134264	Implementation of PrEP Care Among Women in Family Planning Clinics	Rush University Medical Center	3/21/25
R01MH134267	Evaluating the effectiveness of a mobile HIV prevention app to increase HIV and STI testing and PrEP initiation among rural men who have sex with men	Emory University	3/21/25
R01MH134721	A randomized clinical trial of client-centered care coordination to improve pre-exposure prophylaxis use for Black men who have sex with men	University Of Maryland Baltimore	3/21/25
R01MH135498	Using digital photovoice to explore the relationships between social media content and suicidality among transgender adolescents	University Of Wisconsin Milwaukee	3/21/25
R01MH138225	A Multi-Level Integrated Strategy to Optimize PrEP Adherence for Black MSM and Accelerate Implementation at Scale	Yale University	3/21/25
R01NR020309	Harnessing the power of technology to develop a population-based HIV prevention program for trans girls	Center For Innovative Public Health Research	3/21/25
R01NR020437	Characterizing intersecting sexual, gender, and race-based stigmas affecting communities of US transgender women and cisgender men who are sexually active with men	Johns Hopkins University	3/21/25
R01NR021019	Enhancing Structural Competency in School-Based Health Centers to Address LGBTQ+ Adolescent Health Equity	Pacific Institute For Res And Evaluation	3/21/25
R01NR021170	Status-neutral community-based multilevel intervention to address intersectional stigma and discrimination, and increase HIV testing, PrEP, and ART uptake among YGBMSM in Ghanaian Slums	University Of Rochester	3/21/25
R01NS101483	Reducing Disparities in Dementia and VCID Outcomes in a Multicultural Rural Population	University Of Miami School Of Medicine	3/21/25
R01TW012392	Buddhism and HIV Stigma in Thailand: An Intervention Study	University Of California Los Angeles	3/21/25
R01TW012392-03S1	Buddhism and HIV Stigma in Thailand: An Intervention Study	University Of California Los Angeles	3/21/25
R01TW012671	Adaptation and feasibility of Many Men Many Voices (3MV), an HIV prevention intervention to reduce intersectional stigma and increase HIVST among YSMM residing in Ghanaian slums	University Of Rochester	3/21/25
R03DA052651	Improving Sexual Minority Health: Differences in Substance Use, Substance Use Treatment, and Associated Chronic Diseases among Rural versus Urban Populations	Ohio State University	3/21/25
R03MH130275	Applying Deep Learning for Predicting Retention in PrEP Care and Effective PrEP Use among Key Populations at Risk for HIV in Thailand	Univ Of Massachusetts Med Sch Worcester	3/21/25
R13AA031402	Enhancing dissemination and career development in sex and gender translational science in alcohol use	Yale University	3/21/25
R13AG056135	Organization for the Study of Sex Differences Annual Meeting	University Of California Los Angeles	3/21/25
R13AG066389	The ADAR Summit Meeting	University Of South Carolina At Columbia	3/21/25
R13HD090968	Boston University Conference on Language Development, 2022-2026	Boston University (Charles River Campus)	3/21/25
R13HL173969	Society of Behavioral Medicine 2024 Annual Meeting & Scientific Sessions	Society Of Behavioral Medicine	3/21/25
R13MD019531	SOCIAL MEDICINE CASES FOR HEALTH EQUITY	University Of California Berkeley	3/21/25
R21AG087792	Bridge to Belonging (B2B): Peer led intervention to reduce loneliness and depression among older gay and bisexual men	Fenway Community Health Center	3/21/25
R21AI178840	Defining the neovaginal microbiome after gender affirming vaginoplasty	Case Western Reserve University	3/21/25
R21AI183907	Applying a Behavioral Economic Approach on PrEP and Hormone Options among Transgender Women	University Of Washington	3/21/25
R21CA292185	Adapting and testing a smoking cessation intervention for transgender and gender-diverse individuals	Massachusetts General Hospital	3/21/25
R21DA053156	Social environmental drivers of stimulant use and its impact on HIV prevention and treatment in Black men who have sex with men	New York State Psychiatric Institute Dba Research Foundation For Mental Hygiene, Inc	3/21/25

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R25GM066534 Virginia Tech Postbaccalaureate Research Education Program (VT PREP) Virginia Polytechnic Inst And St Univ 3/21/25	R25GM050070	BioPREP: Biology Partnership in Research and Education Program	State University New York Stony Brook	3/21/25
	R25GM060566	The Next Generation of Black Women Scientists	Spelman College	3/21/25
R25GM144253 Intermountain PREP University Of Utah 3/21/25	R25GM066534	Virginia Tech Postbaccalaureate Research Education Program (VT PREP)	Virginia Polytechnic Inst And St Univ	3/21/25
	R25GM144253	Intermountain PREP	University Of Utah	3/21/25

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R25GM147291	STEM-Coaching and Resources for Entrepreneurial Women (CREW)	Medical University Of South Carolina	3/21/25
R25GM152359	PREP-MT: Providing Research Education for Postbaccalaureate Trainees in Montana	Montana State University - Bozeman	3/21/25
R25HD116367	Restoring equity to measuring and preventing perinatal intimate partner violence (Remap-IPV)	Univ Of North Carolina Chapel Hill	3/21/25
R25HG012330	Training in Genomics Research (TiGeR)	Arizona State University-Tempe Campus	3/21/25
R25MH119858	SHINE Strong: Building the pipeline of HIV behavioral scientists with expertise in trans population health	Public Health Foundation Enterprises	3/21/25
R25MH126703	Pipeline to Graduate Education and Careers in Behavioral and Social Science Research for URM Undergraduates: Addressing HIV in Sexual and Gender Minority Communities	University Of Michigan At Ann Arbor	3/21/25
R25MH129290	Short Trainings on Methods for Recruiting, Sampling, and Counting Hard- to-Reach Populations: The H2R Training Program	University Of California, San Francisco	3/21/25
R33HD107988	Optimizing an mHealth intervention to improve uptake and adherence of the HIV pre-exposure prophylaxis (PrEP) in vulnerable adolescents and emerging adults	Univ Of Massachusetts Med Sch Worcester	3/21/25
R33MH120236	Suicide Prevention for Sexual and Gender Minority Youth	San Diego State University	3/21/25
R33TW011665	Development and Testing of a Mobile Application to Enhance HIV Prevention Cascade in Malaysian MSM	University Of Connecticut Storrs	3/21/25
R34AA030035	Integrated Alcohol and Sexual Assault Prevention for Bisexual Women	Rhode Island Hospital	3/21/25
R34AA030662	An Online Family-based Program to Prevent Alcohol Use and Dating and Sexual Violence among Sexual and Gender Minority Youth	University Of Colorado	3/21/25
R34CA283408	Adapting the FOCUS Program for Sexual and Gender Minority (SGM) Cancer Patients and Caregivers	University Of Rochester	3/21/25
R34DA055503	Integration of Electronic SBI(RT) into an HIV Testing Program to Reduce Substance Use and HIV risk Behavior among MSM in Argentina	Florida State University	3/21/25
R34DA058191	Proud to Quit (P2Q): A Person-centered mobile technology intervention for smoking cessation among transgender adults	University Of Colorado Denver	3/21/25
R34MH124081	Adapting effective mhealth interventions to improve uptake and adherence of the HIV pre- exposure prophylaxis (PrEP) in Thai young MSM	Univ Of Massachusetts Med Sch Worcester	3/21/25
R34MH126894	Making universal, free-of-charge antiretroviral therapy work for sexual and gender minority youth in Brazil	Brown University	3/21/25
R34MH129187	Brothers building brothers by breaking barriers (B6): A resilience-focused intervention for young Black gay and bisexual men living with HIV	Emory University	3/21/25
R34MH129189	Data-driven, peer-led messaging using social media influencers to increase PrEP awareness and uptake among transgender women	Temple Univ Of The Commonwealth	3/21/25
R34MH129208	3T-Prevent: Piloting a multi-level, combination intervention strategy to expand HIV and bacterial STI prevention	Medical College Of Wisconsin	3/21/25
R34MH129218	Piloting a multi-level intervention to promote viral suppression among transgender women living with HIV	Univ Of North Carolina Chapel Hill	3/21/25
R34MH129279	eSTEP: An integrated mHealth intervention to engage high-risk individuals along the full PrEP care continuum	San Diego State University	3/21/25
R34MH129782	CA-LINC: A Culturally Adapted Care Coordination Suicide Detection and Intervention Model for Black Youth The Plu Works Suiside Descention Decrements of Counter Minority	University Of North Carolina Charlotte	3/21/25
R34MH129785	The BH-Works Suicide Prevention Program for Sexual and Gender Minority Youth	Virginia Polytechnic Inst And St Univ	3/21/25
R34MH132405	MyPrEP Plus: Development and Pilot Testing of Novel Pre-Exposure Prophylaxis Support Tools for Transgender Women	Public Health Foundation Enterprises	3/21/25
R34MH133768	Development and Preliminary Trial of a Digital Transdiagnostic CBT Intervention for Transgender Adolescents	Lurie Children's Hospital Of Chicago	3/21/25
R34MH134603	Feasibility, acceptability, and preliminary efficacy of an adapted group- based and online HIV prevention intervention for immigrant sexual minority men in the US	University Of Illinois At Chicago	3/21/25
R34MH134912	Youth Empowerment and Safety Intervention for Systems-involved Sexual and Gender Minority Youth at Risk of Suicide	Case Western Reserve University	3/21/25
R34MH137753	Developing and pilot testing an eHealth decision support tool for young trans women to improve informed decision making about PrEP	Temple Univ Of The Commonwealth	3/21/25
R36AG083386	Multi-Level Determinants of Sexual and Gender Minority Aging	Vanderbilt University	3/21/25
R36DA058563	Exploring the Role of Novel Aging-Focused Syndemic Conditions on HIV Risk and Quality of Life among HIV-Negative Older Sexual Minority Men	University Of Miami Coral Gables	3/21/25
R36DA058819	Identifying Transdiagnostic Intervention Targets for PTSD-SUD Comorbidity in a Vulnerable Population: A Mixed-Method Study	Hunter College	3/21/25
R37AG076057	How Spouses Influence Each Other's Health in Same- and Different-Sex Marriages: A Dyadic and Longitudinal Assessment from Mid to Later Life	University Of Texas At Austin	3/21/25
R37CA226682	A Randomized Controlled Trial of an HPV Vaccine Intervention for Young Sexual Minority Men	Ohio State University	3/21/25
R43MD019197	Bridges: A digital intervention to increase workplace belonging	Pro-Change Behavior Systems, Inc.	3/21/25
R44AG045011	Phase IIB: Development of TruT Algorithm for Commercialization in Androgen Disorders	Function Promoting Therapies, Llc	3/21/25
R44HD103517	Step UP for STEM and Health Careers: An Intervention to Reduce STEM- related biases and improve high school STEM learning environments	Resilient Games Studio, Llc	3/21/25

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R44HD106855	Evidence-based Parent Training for Diverse Families (PTDF)	Iris Media, Inc.	3/21/25
R56AG079510	Asian Americans & Racism: Individual and Structural Experiences (ARISE)	University Of California, San Francisco	3/21/25
R56AG087032	Social Connectedness, Loneliness, and Health Among Aging Black Sexual Minority Men	Rand Corporation	3/21/25
R56HD113725	Examining reproductive and sexual health during the transition to adulthood	Innovation Research And Training, Inc.	3/21/25
R61DA056779	Cue Reactivity Modulation in MSM with Methamphetamine Use Disorder	Icahn School Of Medicine At Mount Sinai	3/21/25
R61MH133710	Targeting Minority Stressors to Improve Eating Disorder Symptoms in Sexual Minority Individuals with Eating Disorders	Auburn University At Auburn	3/21/25
S21MD012472	Texas Minority Health, Research and Outreach (MiHERO)	University Of North Texas Hlth Sci Ctr	3/21/25
S21MD018960	Charles R. Drew University of Medicine and Science Research Endowment Program	Charles R. Drew University Of Med & Sci	3/21/25
SC1DA052120	GHB Toxicokinetics: Role of sex hormone dependent monocarboxylate transporter regulation and potential for altered overdose risk in transgender men and women	University Of The Pacific-Stockton	3/21/25
T32DA057926	Building an interprofessional and diverse workforce in substance use and pain	University Of Pittsburgh At Pittsburgh	3/21/25
T32MD019780	ADVANCE SGM Health for Research Diversity	University Of Alabama At Birmingham	3/21/25
T34GM149823	U-RISE at Spelman College	Spelman College	3/21/25
T37MD008636	Transdisciplinary Health Disparities Research Training for Native Hawaiians and Pacific Students	University Of Hawaii At Manoa	3/21/25
U01AI156874	Effectiveness of Relationship Education for Reducing HIV Incidence in Men Who Have Sex with Men	Northwestern University At Chicago	3/21/25
U01DA036926	Using Longitudinal Research to Engage African American and Latinx Sexual- and Gender-Minority Youth in the HIV Prevention and Care Continua and Reduce HIV/AIDS-Related Disparities	Children's Hospital Of Los Angeles	3/21/25
U01DA036939	Multilevel Influences on HIV and Substance Use in a YMSM cohort	Northwestern University At Chicago	3/21/25
U01GM132133-05S1	Building Up	University Of Pittsburgh At Pittsburgh	3/21/25
U01GM132133-05S2	Building Up	University Of Pittsburgh At Pittsburgh	3/21/25
U01GM132375	Boosting Mentor Effectiveness iN Training of Research Scientists (MENTORS) Using Social Cognitive Career Theory to Support Entry of Women & Minorities into Physician-Scientist Careers	University Of Chicago	3/21/25
U01HD108738	Harnessing the power of text messaging to reduce HIV incidence in adolescent males across the United States	Center For Innovative Public Health Research	3/21/25
U01MD018310	Faithful Response II: COVID-19 Rapid Test-to-Treat with African American Churches	University Of Missouri Kansas City	3/21/25
U01MD019398	Increasing financial and health equity among low income black youth and young adults	University Of California, San Francisco	3/21/25
U01MD019398-03S1	Increasing financial and health equity among low income black youth and young adults - DEIA Supplement	University Of California, San Francisco	3/21/25
U01MH136574	Hermanos de Luna y Sol: A community-based HIV prevention intervention	San Francisco State University	3/21/25
U19NS120384 U24AG083253	The Clinical Significance of Incidental White Matter Lesions on MRI Amongst a Diverse Population with Cognitive Complaints (INDEED) Resource Centers for Minority Aging Research National Coordinating	University Of California At Davis	3/21/25
U24DK138889	Center (RCMARs NCC) VCU National Coordinating Center for Advancing Gender Inclusive	Gerontological Society Of America Virginia Commonwealth University	3/21/25
U24MD017250	Excellence Research Coordinating Center to Reduce Disparities in Multiple Chronic	University Of California, San Francisco	3/21/25
U24MD017250-04S1	Diseases (RCC RD-MCD) Research Coordinating Center to Reduce Disparities in Multiple Chronic	University Of California, San Francisco	3/21/25
U54CA267735	Diseases (RCC RD-MCD) Catalyzing Systemic Change at Drexel University to Support Diverse	Drexel University	3/21/25
U54CA280915	Faculty in Health Disparities Research Vanderbilt FIRST - Elevating Excellence and Transforming Institutional	Vanderbilt University Medical Center	3/21/25
U54DA060049	Culture Advancing Tobacco Regulatory Science to Reduce Health Disparities	Univ Of North Carolina Chapel Hill	3/21/25
U54HD113292	Center to Advance Reproductive Justice and Behavioral Health among	Morehouse School Of Medicine	3/21/25
U54MD007582	Black Pregnant/Postpartum Women and Birthing People (CORAL). FAMU Center for Health Disparities Research	Florida Agricultural And Mechanical Univ	3/21/25
U54MD007586	The RCMI Program in Health Disparities Research at Meharry Medical College	Meharry Medical College	3/21/25
U54MD007598	Center for Accelerating Excellence in Translational Science (AXIS)	Charles R. Drew University Of Med & Sci	3/21/25
U54MD007601-38S2	Evaluating HPV Vaccination Uptake Barriers and its Efficacy in PLWH	University Of Hawaii At Manoa	3/21/25
U54MD012393	The FIU Research Center in a Minority Institution (FIU-RCMI)	Florida International University	3/21/25
U54MD012523	Center for Health Equity Research (CHER)	University Of Illinois At Chicago	3/21/25
UG1HD113160	Intensive Combination Approach to Rollback the HIV Epidemic in Nigerian	Northwestern University At Chicago	3/21/25
00110110100	Youth (iCARE) Plus Effectiveness / Implementation Hybrid Study	Hordiwestern University At Onicago	5/21/25

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UG1HD113162	Resilient HIV Implementation Science with Sexual and Gender Minority Youths using Evidence (RISE) Clinical Research Center	University Of Maryland Baltimore	3/21/25
UG3AI169631	Keeping it LITE 2: Exploring HIV Risk in Vulnerable Youth with Limited Interaction and Digital Health Intervention (LITE-2)	Hektoen Institute For Medical Research	3/21/25
UG3AI176853	Limited interaction cohort to identify determinants of viral suppression in MSM and transfeminine individuals living with HIV: A multilevel approach	Emory University	3/21/25
UG3HD115253	Adaptable Community-Engaged Intervention for Violence Prevention: Michigan Model	Eastern Michigan University	3/21/25
UG3MH133258	Identifying socioecological profiles that impact changes in care outcomes among Black Sexual minority men living with HIV	George Washington University	3/21/25
UG4LM013725	NNLM Region 5: Reaching More People in More Ways	University Of Washington	3/21/25
UH3AI169631	Keeping it LITE 2: Exploring HIV Risk in Vulnerable Youth with Limited Interaction and Digital Health Intervention (LITE-2)	University Of Illinois At Chicago	3/21/25
UH3AI169655	Multilevel strategies to understand and modify the role of structural and environmental context on HIV inequities for sexual and gender minorities of color	George Washington University	3/21/25
UH3AI169658	MyPEEPS Mobile LITE: Limited Interaction Efficacy Trial of MyPEEPS Mobile to Reduce HIV Incidence and Better Understand the Epidemiology of HIV among YMSM	Columbia University Health Sciences	3/21/25
UM1AI068619	HIV Prevention Trials Network Leadership and Operations Center	Family Health International	3/21/25
UM1AI069463	Wits HIV Research Group CLINICAL TRIAL UNIT (CTU) reapplication	Wits Health Consortium (Pty), Ltd	3/21/25
UM1AI154468	ICAP Clinical Trials Unit	Columbia University Health Sciences	3/21/25
UM2HD111076	Adolescent Medicine Trials Network for HIV/AIDS Interventions (ATN) Operations and Collaborations Center (UM2 Clinical Trial Optional)	Westat, Inc.	3/21/25
UM2HD111102	RP4 LEAP	Florida State University	3/21/25
OT2OD035659	Macro-level Health Considerations of Community and Criminal Justice System Relationships in North Texas	Healthy Tarrant County Collaboration	3/22/25
OT2OD035659-01S1	Macro-level Health Considerations of Community and Criminal Justice System Relationships in North Texas	Healthy Tarrant County Collaboration	3/22/25
OT2OD035669	Asian Community-Led Health Equity Structural Intervention (Asian CHESI)	Asian Community Health Coalition	3/22/25
OT2OD035669-01S1	Asian Community-Led Health Equity Structural Intervention (Asian CHESI)	Asian Community Health Coalition	3/22/25
OT2OD035834	Addressing Systemic Barriers Impacting Health in CHC Communities	Asian American Health Coalition/Houston	3/22/25
OT2OD035834-01S1	Addressing Systemic Barriers Impacting Health in CHC Communities	Asian American Health Coalition/Houston	3/22/25
OT2OD035877	Achieving Optimal Sexual and Reproductive Health (SRWH Project)	My Brother's Keeper, Inc.	3/22/25
OT2OD035877-01S1	Achieving Optimal Sexual and Reproductive Health (SRWH Project)	My Brother's Keeper, Inc.	3/22/25
OT2OD035980-01S1	Engaging Diverse Stakeholders in Genomic/Precision Medicine Research: The All of Us Research Program Engagement Core	Vanderbilt University Medical Center	3/22/25
OT2OD036428	All of Us Southern California Consortium (AoUSCC): Engagement, Enrollment, and Retention of Diverse Populations	University Of California-Irvine	3/22/25
OT2OD037655	Building a Diverse Network to Support and Build Pathways for Historically Underrepresented Students in Quantitative-Focused Research Areas Within the All of Us Research Program	New York University	3/22/25
OT2OD037880	NATIONAL LATINO NETWORK (NLN) FOR PRECISION MEDICINE AND HEALTH DISPARITIES RESEARCH	Comprehensive Cancer Center/ Univ/Pr	3/22/25
OT2HL158287-01S6	NHLBI Maternal Morbidity and Mortality (3M) Administrative Coordinating Center	Westat, Inc.	3/24/25
P01AI158571	Design and Development of a Pan-betacoronavirus Vaccine	Duke University	3/24/25
P01AI165072	Discovering Durable Pan-Coronavirus Immunity	Brigham And Women's Hospital	3/24/25
P01AI165077	PanCorVac (Center for Pan-Coronavirus Vaccine Development)	University Of Wisconsin-Madison	3/24/25
P50DA048756-04S3	Prevention Research Center: Parenting Among Women Who Are Opioid Users	University Of Oregon	3/24/25
R01AI153087	Viral and immune kinetics in rhinovirus infection following hematopoietic cell transplantation	Seattle Children's Hospital	3/24/25
R01AI157253	Genetic Analysis of COVID-19 Susceptibility and Resistance Determinants in the Collaborative Cross	Univ Of North Carolina Chapel Hill	3/24/25
R01AI158060	Developing a Multi-epitope Pan-Coronavirus Vaccine	University Of California-Irvine	3/24/25
R01Al158177	Novel delivery platform and antigen design for an effective COVID-19 vaccine	Purdue University	3/24/25
R01AI158463	Coronavirus RNA synthesis by multicomponent protein machines	University Of Wisconsin-Madison	3/24/25
R01AI158775	Development of dual inhibitors targeting the viral main protease and the host cathepsin L as SARS-CoV-2 antivirals	Rutgers Biomedical And Health Sciences	3/24/25
R01Al161374	Development and characterization of engineered therapeutic antibodies against SARS-CoV-2	Washington University	3/24/25
R01Al169543	Rapid response for pandemics: single cell sequencing and deep learning to predict antibody sequences against an emerging antigen	Keck Graduate Inst Of Applied Life Scis	3/24/25
R01AR065493-07S2	Psychosocial Factors and Lupus Disease Progression Among African American Women	Tulane University Of Louisiana	3/24/25

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R01DE031927	Development of a handheld rapid air sensing system to monitor and quantify SARS-CoV-2 in aerosols in real-time	Genendeavor, Llc	3/24/25
R01DK122843-05S1	Effect of obesity on HIV pathogenesis, antiretroviral therapy, and metabolic comorbidities	Oregon Health & Science University	3/24/25
R01DK132735	Metabolic and epigenetic reprogramming of vital organs in SARS-CoV-2 induced systemic toxicity	University Of California Los Angeles	3/24/25
R01HL163814	SARS-CoV-2 tropism in the brain and its relationship to COVID-19 pathogenesis	Brigham And Women's Hospital	3/24/25
R01MD016526	Marshallese: Alternate Surveillance for COVID-19 in a Unique Population	Washington State University	3/24/25
R21AI161501	Elucidating Airborne SARS-CoV-2 Infectivity at Single Aerosol Resolution	Univ Of Maryland, College Park	3/24/25
R24AI120942	World Reference Center for Emerging Viruses and Arboviruses (WRCEVA)	University Of Texas Med Br Galveston	3/24/25
R56AI186400	A Tunable Nanophage Platform for Vaccine Development	University Of Colorado Denver	3/24/25
S06GM127983	RAD-X UP NARCH Supplement: A Cherokee Nation Community-Driven Program for Testing and Contact Tracing (Cherokee PROTECT)	Cherokee Nation	3/24/25
S06GM127983	Cherokee Nation Native American Research Center for Health	Cherokee Nation	3/24/25
U01AI138897-05S2	HOPE in Action: A Clinical Trial of HIV-to-HIV Liver Transplantation	Johns Hopkins University	3/24/25
U01CA260462	Adaptive Immunity and Persistent SARS-CoV-2 Replication	University Of Alabama At Birmingham	3/24/25
U01CA260469	Culturally-targeted communication to promote SARS-CoV-2 antibody testing in saliva: Enabling evaluation of inflammatory pathways in COVID- 19 racial disparities	Michigan State University	3/24/25
U01CA260476	Immunologic Signatures of SARS-CoV-2 Vaccination and Disease	Beth Israel Deaconess Medical Center	3/24/25
U01CA260507	Immuno-Serological Assays for Monitoring COVID19 in Patients with	Yale University	3/24/25
10404000500	Hematologic Malignancies		0/04/05
U01CA260508 U01CA260513	High-Throughput Dried Blood Spot (HT-DBS) Technologies in SARS COV-2 Serology and Vaccinology Pre-exposure Immunologic Health and Linkages to SARS-COV2 Serologic	Wadsworth Center Case Western Reserve University	3/24/25
001CA200515	Responses, Endothelial Cell Resilience, and Cardiovascular Complications: Defining the mechanistic basis of high risk endotypes.	Case western reserve University	5/24/25
U01CA260513-02S3	Pre-exposure Immunologic Health and Linkages to SARS-COV2 Serologic Responses, Endothelial Cell Resilience, and Cardiovascular Complications: Defining the mechanistic basis of high risk endotypes.	Case Western Reserve University	3/24/25
U01CA260584	SARS-CoV-2 Serological Antibody Testing for Disease Surveillance and Clinical Use	Kaiser Foundation Research Institute	3/24/25
U01CA260588	SARS-CoV-2-reactive tissue-resident memory T cells in healthy and cancer subjects	La Jolla Institute For Immunology	3/24/25
U01CA261277	Casual, Statistical and Mathematical Modeling with Serologic Data	Harvard School Of Public Health	3/24/25
U01DA040381-05S2	Community-Engaged Research on COVID-19 Testing Among Underserved and/or Vulnerable Populations	Florida International University	3/24/25
U01DA053903	Wastewater Assessment for Coronavirus in Kentucky: Implementing Enhanced Surveillance Technology	University Of Kentucky	3/24/25
U01DA057849	Supported employment to create a community culture of SARS-CoV-2 rapid testing among people who inject drugs: PeerConnect2Test	University Of Oregon	3/24/25
U01MD017412	Sin Duda: a community-driven approach to expand reach, access and uptake of COVID-19 home-based tests for at risk Latinos	Johns Hopkins University	3/24/25
U01MD017426	Puerto Rico Community Action Research and Engagement (PR-CARE) to Eliminate Disparities in Diagnostic of COVID-19 among Rural Underserved and Vulnerable Populations.	University Of Puerto Rico Med Sciences	3/24/25
U01MD017434	COVID-19 and Southeast Asian Americans	California State University Northridge	3/24/25
U19AI171403	Antiviral Countermeasures Development Center (AC/DC)	Emory University	3/24/25
U19AI171413	UTMB-Novartis Alliance for Pandemic Preparedness	University Of Texas Med Br Galveston	3/24/25
U19AI171954	Midwest AViDD Center	University Of Minnesota	3/24/25
U24LM013755	RADx-Rad Discoveries & Data: Consortium Coordination Center Program Organization	Yale University	3/24/25
U24MD016258	RADx-UP CDCC	Duke University	3/24/25
U24TR001608	ACTIV-6	Duke University	3/24/25
U24TR001608	ACTIV-6	Duke University	3/24/25
U54CA260492	Johns Hopkins Excellence in Pathogenesis and Immunity Center for SARS- CoV-2 (JH-EPICS)	Johns Hopkins University	3/24/25
U54CA260517	Mechanisms and Duration of Immunity to SARS-CoV-2	Stanford University	3/24/25
U54CA260543	North Carolina Seronet Center for Excellence	Univ Of North Carolina Chapel Hill	3/24/25
U54CA260560	Vulnerability of SARS- CoV-2 Infection in Lung Cancer Based on Serological Antibody Analyses	Icahn School Of Medicine At Mount Sinai	3/24/25
U54CA260563	Immune Regulation of COVID-19 Infection in Cancer and Autoimmunity	Emory University	3/24/25
U54CA260563-02S3	Administrative Supplement for Emory SeroNet "Immune Regulation of COVID-19 Infection in Cancer and Autoimmunity"	Emory University	3/24/25
U54CA260581	Tulane University COVID Antibody and Immunity Network (TUCAIN)	Tulane University Of Louisiana	3/24/25

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U54CA260581-02S3	Tulane University COVID Antibody and Immunity Network (TUCAIN) Supplement	Tulane University Of Louisiana	3/24/25
U54CA260582	Center for Serological Testing to Improve Outcomes from Pandemic COVID-19 (STOP-COVID)	Ohio State University	3/24/25
U54CA260582-02S3	Center for Serological Testing to Improve Outcomes from Pandemic COVID-19 (STOP-COVID)	Ohio State University	3/24/25
U54CA260591	Diversity and Determinants of the Immune-Inflammatory Response to SARS-CoV-2	Cedars-Sinai Medical Center	3/24/25
U54EB015408-08S1	Point of Care Technology Research Center in Primary Care	Massachusetts General Hospital	3/24/25
UM1AI068618-18S2	CoVPN 3008 Multi-Center, Randomized, Efficacy Study of Early vs Deferred Vaccination with COVID-19 mRNA Vaccine in Regions with SARS-CoV-2	Fred Hutchinson Cancer Center	3/24/25
UM1AI068635-18S1	Variants of Concern - LC GY18 CoVPN 3008 2022-2023	Fred Hutchinson Cancer Center	3/24/25
UM1AI148684-03S1	Leadership Group for the Infectious Diseases Clinical Research	Emory University	3/24/25
U19AG078558	Consortium (IDCRCLG) Alzheimer's Disease and Alzheimer's Disease Related Dementias in Prediabetes and Type 2 Diabetes: The Diabetes Prevention Program Outcomes Study AD/ADRD Project	Columbia University Health Sciences	3/25/25
R13ES036080	Society of Toxicology Undergraduate Diversity Program	Society Of Toxicology	3/26/25
U01ES036366	Examining Anti-Racist Healing in Nature to Protect Telomeres of Transitional Age BIPOC for Health Equity.	San Francisco State University	3/26/25
U01ES036366-03S1	Examining Anti-Racist Healing in Nature to Protect Telomeres of Transitional Age BIPOC for Health Equity.	San Francisco State University	3/26/25
U01ES036366-03S2	Examining Anti-Racist Healing in Nature to Protect Telomeres of Transitional Age BIPOC for Health Equity.	San Francisco State University	3/26/25
R01ES035053	An assessment of environmental and neighborhood-level risk factors for subfertility among Black women in the U.S.	Boston University Medical Campus	3/27/25
R01ES035053-03S1	An assessment of environmental and neighborhood-level risk factors for subfertility among Black women in the U.S.	Boston University Medical Campus	3/27/25
T34GM136483	U-RISE at Texas State University	Texas State University	3/27/25
T34GM140948	U-RISE at Kennesaw State	Kennesaw State University	3/27/25
T34GM145508	U-RISE at Clark Atlanta University	Clark Atlanta University	3/27/25
T34GM145529	U-RISE at the University of Texas at El Paso	University Of Texas El Paso	3/27/25
T34GM145533	U-RISE at Marquette University	Marquette University	3/27/25
T34GM149434	U-RISE at the UNC Pembroke	University Of North Carolina At Pembroke	3/27/25
T34GM149449	U-RISE at University of Alaska Anchorage ("Biomed U-RISE")	University Of Alaska Anchorage	3/27/25
T34GM149459	U-RISE at City College of New York	City College Of New York	3/27/25
T34GM149461	U-RISE Program at San Jose State University	San Jose State University	3/27/25
T34GM149475	U-RISE at Queens College, CUNY	Queens College	3/27/25
T34GM149490	U-RISE at Brooklyn College	Brooklyn College	3/27/25
T34GM153538	U-RISE at the University of West Florida	University Of West Florida	3/27/25
T34GM153609	U-RISE at Rutgers University - Camden	Rutgers The State Univ Of Nj Camden	3/27/25
R01MD016738-04S1	The ADELANTE Trial: Testing a multi-level approach for improving household food insecurity and glycemic control among Latinos with diabetes	Stanford University	3/28/25
R01MD018255-03S1	Recovery Finance: Financial health and mental health after incarceration	Yale University	3/28/25
T34GM145509	U-RISE at Nova Southeastern University	Nova Southeastern University	3/31/25
T34GM149492	U-RISE at Cal Poly	California Poly State U San Luis Obispo	3/31/25
K01AG065440	Creating Innovative Vaccine Messaging by Engaging in Patient-Centered Design with Non-Vaccinating Older Adults	University Of Iowa	4/1/25
K22CA258675	Addressing HPV vaccination disparities through tailored messaging for hesitant families	Rutgers Biomedical And Health Sciences	4/1/25
K22CA288932	Cancer Misinformation and Use of Complementary and Alternative Therapy (CAM) among Patients with Cancer.	Hackensack University Medical Center	4/1/25
R00CA248720	Cancer misinformation on social media and its correction	Northeastern University	4/1/25
R01AR080089	Leveraging Community-Academic Partnerships and Social Networks to Disseminate Vaccine-Related Information and Increase Vaccine Uptake Among Black Individuals with Rheumatic Diseases	Northwestern University At Chicago	4/1/25
R01CA248216	Promoting HPV Vaccination among Young Adults in Texas	University Of Tx Md Anderson Can Ctr	4/1/25
R01CA248216-04S1	Promoting HPV Vaccination among Young Adults in Texas	University Of Tx Md Anderson Can Ctr	4/1/25
R01CA273208	Conversational Agents to Improve HPV Vaccine Acceptance in Primary	Tufts Medical Center	4/1/25
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R01MD016834	A multidimensional Digital Approach to Address Vaccine Hesitancy and Increase COVID-19 Vaccine Uptake among African American Young Adults	Florida State University	4/1/25
R01MD016864	in the South K-VAC: Kentucky Vaccinating Appalachian Communities	University Of Kentucky	4/1/25
R01MD016880	Increasing COVID-19 Vaccine Uptake among Latinos through a Targeted Clinical and Community-behavioral Intervention	San Diego State University	4/1/25
R01MD016882	Community-based Design and Evaluation of a Conversational Agent to Promote SARS-COV2 Vaccination in Black Churches	Northeastern University	4/1/25
R01MD016992	Addressing COVID 19 Vaccine Hesitancy in Rural Community Pharmacies Reducing Disparities Through an Implementation Science Approach	Univ Of North Carolina Chapel Hill	4/1/25
R01MD017364	REDES: a peer network and mobile health (mHealth) enhanced CHW model to maximize COVID-19 vaccination among low income Latinos	Johns Hopkins University	4/1/25
R01MD018343	LatiNET, a Multilevel Social Network Model to Examine and Address SARS- CoV-2 Misinformation in Low-Income Latinx Communities.	University Of Miami School Of Medicine	4/1/25
R01MD019024	Advancing communication strategies to support future HIV vaccine use among African Americans in the South.	Wake Forest University Health Sciences	4/1/25
R01MD019235	Improving COVID-19 Vaccine Uptake Among Racial and Ethnic Minority Groupswith Rheumatic Diseases	University Of Alabama At Birmingham	4/1/25
R01MD019686	Community - based behavioral intervention to increase COVID - 19 and influenza vaccination for African American/ Black and Latino persons: An optimization randomized controlled trial	New York University	4/1/25
R01MD019765	Influence of Social Media, Social Networks, and Misinformation on Vaccine Acceptance Among Black and Latinx Individuals	University Of California-Irvine	4/1/25
R01MH132500	Evaluating a Multilevel Communication Campaign to Increase HIV Vaccine Trial Enrollment	Fred Hutchinson Cancer Center	4/1/25
R21MD019388	Integrated Network Analysis of RADx-UP Data to Increase COVID-19 Testing and Vaccination Among Persons Involved with Criminal Legal Systems (PCLS)	Brown University	4/1/25
R21MD019764	COVID-19 Vaccine Coverage and General Vaccine Hesitancy in Rural Areas in the United States	Ohio State University	4/1/25
R25GM150142	Eradicating Misconceptions about Viruses using Multimodal Trace Data in an Intelligent Game-based Environment across Educational Contexts	University Of Idaho	4/1/25
R25GM150172	PBS NewsHour STEM StoryMaker: Project-based learning for youth health literacy and biomedical career awareness through journalism and storytelling	Weta Tv 26	4/1/25
R34CA283483	Multi-level school-based intervention to improve HPV vaccine uptake and completion in South Africa	Brigham And Women's Hospital	4/1/25
R37CA253279	HPV ECHO: Increasing the adoption of evidence-based communication strategies for HPV vaccination in rural primary care practices	Pennsylvania State Univ Hershey Med Ctr	4/1/25
R37CA259210	An inoculation theory-based messaging intervention addressing misinformation about HPV vaccine on social media: The Inoculate for HPV Vaccine randomized controlled trial	University Of Pennsylvania	4/1/25
F31GM151846	Exploring the functional role of tubulin methylation and its regulation by mes-4/NSD in C. elegans	Baylor College Of Medicine	4/2/25
F31GM155995	The Role of the Adaptor Protein Enkurin in Left-Right Patterning- a Promising Link Between Polycystin-2 and Calcium Signaling	Princeton University	4/2/25
K12GM088021	Academic Science Education and Research Training	University Of New Mexico Health Scis Ctr	4/2/25
K12GM119955	The Minnesota IRACDA Program	University Of Minnesota	4/2/25
R01GM138700	Scaling Up Culturally Affirming Pathways to Biomedical Faculty Careers for Native Scholars	University Of California, San Francisco	4/2/25
R25GM069234	YEARS 19 - 23: BCM POST-BACCALAUREATE RESEARCH EDUCATION PROGRAM	Baylor College Of Medicine	4/2/25
T32GM135742	UCSC IMSD	University Of California Santa Cruz	4/2/25
T32GM140951	Graduate Research Training Initiative for Student Enhancement (G-RISE) (T32) at Rutgers University-Newark	Rutgers The State Univ Of Nj Newark	4/2/25
T32GM152777	Baylor College of Medicine Initiative for Maximizing Student Development	Baylor College Of Medicine	4/2/25
T32GM154636	Texas Doctoral Bridge Program	Texas State University	4/2/25
T34GM145539	MARC at the University of Nevada, Reno	University Of Nevada Reno	4/2/25
T34GM149430	MARC at San Diego State University	San Diego State University	4/2/25
T34GM149455	U-RISE at St. Mary's University	St. Mary's University	4/2/25
T34GM149474	U-RISE at University of Detroit Mercy	University Of Detroit Mercy	4/2/25
K99DA060983	The Impact of Social-Contextual Stressors on Psychopharmacological Mechanisms of Smoking Cessation and Relapse among Socioeconomically Disadvantaged Young Adults who Smoke Cigarettes	Brown University	4/7/25
OT2OD035592	Proyecto Juntos	Southeast Arizona Area Health Education Center	4/7/25
OT2OD035592-01S1	Proyecto Juntos	Southeast Arizona Area Health Education Center	4/7/25
OT2OD035605-01S1	Partnership to Optimize Equity in Maternal and Infant Health	Delta Health Alliance, Inc.	4/7/25

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OT2OD035606	Achieving Equity in Farmworker Health Through Community-Led Research	Campesinos Sin Fronteras	4/7/25
OT2OD035606-01S1	Achieving Equity in Farmworker Health Through Community-Led Research	Campesinos Sin Fronteras	4/7/25
OT2OD035609	Healthy and Livable Bronx Partnership	Bronxworks, Inc.	4/7/25
OT2OD035609-01S1	Healthy and Livable Bronx Partnership	Bronxworks, Inc.	4/7/25
OT2OD035636	Agricultural Workers Digital Equity Initiative	Nc State Dept/HIth & Human Services	4/7/25
OT2OD035636-01S1	Agricultural Workers Digital Equity Initiative	Nc State Dept/Hlth & Human Services	4/7/25
OT2OD035677	Puerto Rico Collaborative Advancement of Research, Innovations, Best Practices and Equity for Children, Youth and Families (PR-CARIBE)	Grupo Nexos Inc.	4/7/25
OT2OD035677-01S1	Puerto Rico Collaborative Advancement of Research, Innovations, Best Practices and Equity for Children, Youth and Families (PR-CARIBE)	Grupo Nexos Inc.	4/7/25
OT2OD035746	Creating Statewide Community Partnerships: Spanning Boundaries between Public Health, Emergency Housing & Criminal Justice	Face Addiction Now	4/7/25
OT2OD035746-01S1	Creating Statewide Community Partnerships: Spanning Boundaries between Public Health, Emergency Housing & Criminal Justice	Face Addiction Now	4/7/25
OT2OD035764	Cancer in Your Community: Strategies to Reduce Cancer and Chronic Disease in the Arkansas Delta	Arkansas Cancer Coalition	4/7/25
OT2OD035764-01S1	Cancer in Your Community: Strategies to Reduce Cancer and Chronic Disease in the Arkansas Delta	Arkansas Cancer Coalition	4/7/25
OT2OD035801	Strengthening Community-Driven Safety-Net Interventions to Improve Health and Economic Equity	Access Health Inc	4/7/25
OT2OD035801-01S1	Strengthening Community-Driven Safety-Net Interventions to Improve Health and Economic Equity	Access Health Inc	4/7/25
OT2OD035839	Reducing Health Disparities through Enhanced Mobility Support and Access	Feonix - Mobility Rising	4/7/25
OT2OD035839-01S1	Reducing Health Disparities through Enhanced Mobility Support and Access	Feonix - Mobility Rising	4/7/25
OT2OD035845	Humanitarian Health Care Network: Bringing the Most Vulnerable to Care	Migrant Clinicians Network, Inc.	4/7/25
OT2OD035845-01S1	Humanitarian Health Care Network: Bringing the Most Vulnerable to Care	Migrant Clinicians Network, Inc.	4/7/25
OT2OD035883	Addressing Food Insecurity in Underserved Communities	Health Choice Network, Inc.	4/7/25
OT2OD035883-01S1	Addressing Food Insecurity in Underserved Communities	Health Choice Network, Inc.	4/7/25
OT2OD035940	Watts Rising: A Vision for a Healthier Watts	Housing Authority Of The City Of Los Angeles	4/7/25
OT2OD035940-01S1	Watts Rising: A Vision for a Healthier Watts	Housing Authority Of The City Of Los Angeles	4/7/25
U24NR021014	Advancing Health Equity Through Innovative Community Capacity Building, Data Science & Delivering Community-Centered Structural Interventions & Outcomes: Drexel's ComPASS Coordinating Center (C3)	Drexel University	4/7/25
UC2CA293569	Partners in Research: Building capacity for community-driven research to advance health equity	University Of Michigan At Ann Arbor	4/7/25
UC2CA293782	ComPASS Health Equity Research Hub at UMB	University Of Maryland Baltimore	4/7/25
UC2CA293786	ComPASS Health Equity Research Hub at Yale	Yale University	4/7/25
UC2CA293834	The SHHare Community Project: The Shared Hub for Health Action Research and Equity in Community-led Interventions	New York University School Of Medicine	4/7/25
UC2CA293850	Southeast Center for Health Achievement and Growth in Equity (SEACHANGE) Hub	University Of Mississippi Med Ctr	4/7/25
U54CA267730	Fostering Institutional Resources for Science Transformation: The FLORIDA-FIRST Health-Science Brigade	Florida State University	4/8/25
U54CA267738	Cornell FIRST	Cornell University	4/8/25
U54CA267746	UAB/Tuskegee Faculty Institutional Recruitment for Sustainable Transformation (UAB/TU FIRST) Partnership (NIH U54)	University Of Alabama At Birmingham	4/8/25
U54CA267776	NIH FIRST Cohort Cluster Hiring Initiative at Icahn School of Medicine at Mount Sinai	Icahn School Of Medicine At Mount Sinai	4/8/25
U54CA267789	SDSU FUERTE: Faculty United towards Excellence in Research and Transformational Engagement	San Diego State University	4/8/25
	NURTURE: Northwestern University Recruitment to Transform Under-	Northwestern University At Chicago	4/8/25
U54CA272163	Representation and achieve Equity		
U54CA272167	UNM FIRST: Promoting Inclusive Excellence in Neuroscience and Data Science	University Of New Mexico	4/8/25
U54CA272167 U54CA272205	UNM FIRST: Promoting Inclusive Excellence in Neuroscience and Data Science University of Maryland FIRST Program	University Of Maryland Baltimore	4/8/25
U54CA272167 U54CA272205 U54CA272220	UNM FIRST: Promoting Inclusive Excellence in Neuroscience and Data Science University of Maryland FIRST Program UC San Diego FIRST Program	University Of Maryland Baltimore University Of California, San Diego	4/8/25 4/8/25
U54CA272167 U54CA272205 U54CA272220 U54CA280805	UNM FIRST: Promoting Inclusive Excellence in Neuroscience and Data Science University of Maryland FIRST Program UC San Diego FIRST Program Michigan Program for Advancing Cultural Transformation (M-PACT) in Biomedical and Health Sciences	University Of Maryland Baltimore University Of California, San Diego University Of Michigan At Ann Arbor	4/8/25 4/8/25 4/8/25
U54CA272167 U54CA272205 U54CA272220 U54CA280805	UNM FIRST: Promoting Inclusive Excellence in Neuroscience and Data Science University of Maryland FIRST Program UC San Diego FIRST Program Michigan Program for Advancing Cultural Transformation (M-PACT) in	University Of Maryland Baltimore University Of California, San Diego	4/8/25 4/8/25 4/8/25 4/8/25
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R01HG012824-02S1	Genetic and social determinants of pharmacological health outcomes in ancestrally diverse populations (Recto)	University Of California, San Francisco	4/11/25
R01HG012824-02S2	Genetic and social determinants of pharmacological health outcomes in ancestrally diverse populations (Warren)	University Of California, San Francisco	4/11/25
R01AI110700	Cell entry, cross-species transmission and pathogenesis of novel coronavirus from	Univ Of North Carolina Chapel Hill	4/14/25
R01AI157155	Human antibody-based countermeasures against the Wuhan Coronavirus SARS-CoV-2	Washington University	4/14/25
R21HG013814	APOL1 as a model to quantify and identify environmental modifiers of genetic associations in diverse populations	Case Western Reserve University	4/15/25
T32GM140953	G-RISE at Oklahoma State University	Oklahoma State University Stillwater	4/30/25

EXHIBIT B

Department of Health and Human Services

Part 1. Overview Information

Participating Organization(s)	National Institutes of Health (<u>NIH (http://www.nih.gov</u>))
Components of Participating Organizations	Office of The Director, National Institutes of Health (<u>OD (https://www.nih.gov/institutes-nih/nih-office-director</u>)
	National Eye Institute (<u>NEL (https://www.nei.nih.gov/</u>))
	National Heart, Lung, and Blood Institute (NHLBI (https://www.nhlbi.nih.gov/)
	National Human Genome Research Institute (<u>NHGRI (https://www.genome.gov/)</u>)
	National Institute on Aging (<u>NIA (https://www.nia.nih.gov/</u>)
	National Institute on Alcohol Abuse and Alcoholism (<u>NIAAA (https://www.niaaa.nih.gov/</u>))
	National Institute of Allergy and Infectious Diseases (NIAID (https://www.niaid.nih.gov/))
	National Institute of Arthritis and Musculoskeletal and Skin Diseases (<u>NIAMS</u> (<u>https://www.niams.nih.gov/</u>)
	National Institute of Biomedical Imaging and Bioengineering (NIBIB (https://www.nibib.nih.gov/))
	Eunice Kennedy Shriver National Institute of Child Health and Human Development (<u>NICHD</u> (<u>https://www.nichd.nih.gov/</u>))
	National Institute on Deafness and Other Communication Disorders (<u>NIDCD</u> (<u>https://www.nidcd.nih.gov/</u>)
	National Institute on Drug Abuse (<u>NIDA (https://www.drugabuse.gov/</u>))
	National Institute of Environmental Health Sciences (NIEHS (https://www.niehs.nih.gov/))
	National Institute of General Medical Sciences (<u>NIGMS (https://www.nigms.nih.gov/</u>)
	National Institute of Mental Health (<u>NIMH (https://www.nimh.nih.gov/index.shtml</u>))
	National Institute of Nursing Research (<u>NINR (https://www.ninr.nih.gov/</u>)
	National Center for Complementary and Integrative Health (NCCIH (https://nccih.nih.gov/))
	Division of Program Coordination, Planning and Strategic Initiatives, Office of Research Infrastructure Programs (ORIP (https://orip.nih.gov/))
	National Cancer Institute (<u>NCI (https://www.cancer.gov/</u>)
	National Institute on Diabetes and Digestive and Kidney Diseases (<u>NIDDK</u> (<u>https://www.niddk.nih.gov/</u>), November 22, 2024 - Participation added (<u>NOT-DK-25-007</u> (<u>https://grants.nih.gov/grants/guide/notice-files/NOT-DK-25-007.html</u>))
	All applications to this funding opportunity announcement should fall within the mission of the Institutes/Centers. The following NIH Offices may co-fund applications assigned to those Institutes/Centers.
	Office of Research on Women's Health (<u>ORWH (https://orwh.od.nih.gov/)</u>)
	Office of Data Science Strategy (ODSS (https://datascience.nih.gov/about/odss))
	Special Note: Not all NIH Institutes and Centers participate in Parent Announcements.

respective areas of research interest and requirements at the <u>Table of IC-Specific Information</u>, <u>Requirements and Staff Contacts (https://grants.nih.gov/guide/contacts/PA-25-168.html)</u> website. ICs that do not participate in this announcement will not consider applications for funding. Consultation with NIH staff before submitting an application is strongly encouraged.

Funding Opportunity Title	Ruth L. Kirschstein National Research Service Award (NRSA)
	Institutional Research Training Grant (Parent T32)
Activity Code	<u>T32 (//grants.nih.gov/grants/funding/ac_search_results.htm?</u> <u>text_curr=t32&Search.x=0&Search.y=0&Search_Type=Activity</u>) Institutional National Research Service Award (NRSA)
Announcement Type	Reissue of PA-23-048 (https://grants.nih.gov/grants/guide/pa-files/PA-23-048.html)
Related Notices	See <u>Notices of Special Interest</u> (<u>https://grants.nih.gov/grants/guide/NOSIs_targetingList.cfm?GuideDocID=41857</u>) associated with this funding opportunity
	 December 10, 2024 - Notice of Correction to Eligibility Information and Application Instructions for the Ruth L. Kirschstein National Research Service Award (NRSA) Institutional Research Training Grant (Parent T32) (PA-25-168). See Notice <u>NOT-OD-25-036</u> (//grants.nih.gov/grants/guide/notice-files/NOT-OD-25-036.html). November 22, 2024 - Notice of NIDDK Participation in PA-25-168: "Ruth L. Kirschstein National Research Service Award (NRSA) Institutional Research Training Grant (Parent T32)". See Notice <u>NOT-DK-25-007 (https://grants.nih.gov/grants/guide/notice-files/NOT- DK-25-007.html).</u> November 18, 2024 - Notice of Informational Webinar for NIGMS-Supported Postdoctoral Clinician-Scientists Institutional Training Programs (T32). See Notice <u>NOT-GM-25-005</u> (//grants.nih.gov/grants/guide/notice-files/NOT-GM-25-005.html). April 4, 2024 - Overview of Grant Application and Review Changes for Due Dates on or after January 25, 2025. See Notice <u>NOT-OD-24-084</u> (https://grants.nih.gov/grants/guide/notice-files/NOT-OD-24-084.html).
Funding Opportunity Number (FON)	PA-25-168
Companion Funding Opportunity	None
Number of Applications	See Section III. 3. Additional Information on Eligibility.
Assistance Listing Number(s)	93.310, 93.313, 93.837, 93.233, 93.838, 93.839, 93.840, 93.286, 93.273, 93.213, 93.397, 93.396, 93.399, 93.398, 93.855, 93.351, 93.859, 93.361, 93.279, 93.113, 93.867, 93.172, 93.242, 93.866, 93.865, 93.846, 93.173, 93.847
Funding Opportunity Purpose	The National Institutes of Health (NIH) will award Ruth L. Kirschstein National Research Service Award (NRSA) Institutional Research Training Grants (T32) to eligible, domestic institutions to develop and/or enhance predoctoral and postdoctoral research training, including short-term research training, to help ensure that a diverse and highly trained workforce is available to meet the needs of the Nation's biomedical, behavioral, and clinical research agenda. Research training programs are expected to incorporate engaging, didactic, research, and career development elements to prepare trainees for careers that will have a significant impact on the health-related research needs of the Nation. Programs proposing only short-term predoctoral research training should not apply to this announcement, but rather to the Kirschstein-NRSA Short-Term

Institutional Research Training Grant Program (T35) exclusively reserved for predoctoral, short-term research training.

This Notice of Funding Opportunity (NOFO) does not allow Trainees to lead an independent clinical trial, but does allow them to obtain research experience in a clinical trial led by a mentor or co-mentor.

 Funding Opportunity Goal(s)
 NIH's mission is to seek fundamental knowledge about the nature and behavior of living systems and the application of that knowledge to enhance health, lengthen life, and reduce illness and disability.

Key Dates

Posted Date	November 15, 2024
Open Date (Earliest Submission Date)	December 25, 2024
Letter of Intent Due Date(s)	Not Applicable

The following table includes NIH <u>standard due dates (https://grants.nih.gov/grants/how-to-apply-application-guide/due-dates-and-submission-policies/due-dates.htm</u>) marked with an asterisk.

Application Due Dates		Review and Award Cycles			
New	Renewal / Resubmission / Revision (as allowed)	AIDS - New/Renewal/Resubmission/Revision, as allowed	Scientific Merit Review	Advisory Council Review	Earliest Start Date
January 25, 2025 *	January 25, 2025 *	May 07, 2025 *	July 2025	October 2025	December 2025
May 25, 2025 *	May 25, 2025 *	September 07, 2025 *	November 2025	January 2026	April 2026
September 25, 2025 *	September 25, 2025 *	January 07, 2026 *	March 2026	May 2026	July 2026
January 25, 2026 *	January 25, 2026 *	May 07, 2026 *	July 2026	October 2026	December 2026
May 25, 2026 *	May 25, 2026 *	September 07, 2026 *	November 2026	January 2027	April 2027
September 25, 2026 *	September 25, 2026 *	January 07, 2027 *	March 2027	May 2027	July 2027
January 25, 2027 *	January 25, 2027 *	May 07, 2027 *	July 2027	October 2027	December 2027
May 25, 2027 *	May 25, 2027 *	September 07, 2027 *	November 2027	January 2028	April 2028
September 25, 2027 *	September 25, 2027 *	January 07, 2028 *	March 2028	May 2028	July 2028

All applications are due by 5:00 PM local time of applicant organization.

Applicants are encouraged to apply early to allow adequate time to make any corrections to errors found in the application during the submission process by the due date.

Expiration Date	May 05, 2028

Due Dates for E.O. 12372

Not Applicable

Required Application Instructions

It is critical that applicants follow the Training (T) Instructions in the How to Apply Application Guide, (//grants.nih.gov/grants/guide/url_redirect.php? id=82400) except where instructed to do otherwise (in this NOFO or in a Notice from the <u>NIH Guide for Grants and Contracts</u> (//grants.nih.gov/grants/guide/url_redirect.php?id=11164)). Conformance to all requirements (both in the How to Apply Application Guide, (//grants.nih.gov/grants/guide/url_redirect.php?id=82400) and the NOFO) is required and strictly enforced. Applicants must read and follow all application instructions in the <u>How to Apply Application Guide, (//grants.nih.gov/grants/guide/url_redirect.php?id=82400</u>) as well as any programspecific instructions noted in Section IV. When the program-specific instructions deviate from those in the <u>How to Apply Application Guide</u>, (//grants.nih.gov/grants/guide/url_redirect.php?id=82400), follow the program-specific instructions. **Applications that do not comply with these instructions may be delayed or not accepted for review.**

There are several options available to submit your application through Grants.gov to NIH and Department of Health and Human Services partners. You **must** use one of these submission options to access the application forms for this opportunity.

1. Use the NIH ASSIST system to prepare, submit and track your application online.

Apply Online Using ASSIST

- 2. Use an institutional system-to-system (S2S) solution to prepare and submit your application to Grants.gov and <u>eRA Commons</u> (<u>https://public.era.nih.gov/commons/</u>) to track your application. Check with your institutional officials regarding availability.
- Use <u>Grants.gov (/grants/guide/ApplyButtonSplash.cfm?dest=https://grants.gov/search-grants?</u> <u>oppStatuses=closed|archived|posted|forecasted&fon=PA-25-168)</u> Workspace to prepare and submit your application and <u>eRA Commons</u> (<u>http://public.era.nih.gov/commons/</u>) to track your application.

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Part 2. Full Text of Announcement

Section I. Funding Opportunity Description

The overall goal of the NIH Ruth L. Kirschstein National Research Service Award (NRSA) program is to help ensure that a diverse pool of highly trained scientists is available in appropriate scientific disciplines to address the Nation's biomedical, behavioral, and clinical research needs. In order to accomplish this goal, NRSA training programs are designed to train individuals to conduct research and to prepare for research careers. More information about NRSA programs may be found at the <u>Ruth L. Kirschstein National Research Service Award</u> (https://researchtraining.nih.gov/programs/training-grants/T32-a) (NRSA) website.

The NRSA program has been the primary means of supporting predoctoral and postdoctoral research training programs since enactment of the NRSA legislation in 1974. Institutional NRSA programs allow the Training Program Director/Principal Investigator (Training PD/PI) to select trainees and develop an enhanced program of coursework, mentored research experiences, and technical, operational and professional skills development that provides added value to already existing programs and prepares the appointed trainees for careers in the biomedical research workforce (the breadth of careers that sustain the biomedical research enterprise, including but limited to careers as independent NIH-funded investigators).

The grant offsets the costs of stipends, tuition and fees, and training related experiences, including health insurance, for the appointed trainees in accordance with the approved NIH support levels. The proposed institutional research training program may complement other ongoing research training and career development programs at the applicant organization but must be clearly distinct from related program currently receiving Federal support.

Purpose

The purpose of the Ruth L. Kirschstein National Research Service Award (NRSA) Institutional Research Training Grant (T32) program is to develop and/or enhance research training opportunities for individuals interested in careers in biomedical, behavioral or social sciences, and clinical research, in health services research, or in any other discipline relevant to the NIH mission. NIH encourages biomedical research training to keep pace with the rapid evolution of the biomedical research enterprise that is increasingly complex, interdisciplinary, quantitative, and collaborative. Programs should prepare trainees to effectively engage in a research enterprise characterized by increased breadth in the backgrounds of individuals participating, the approaches taken to investigate research questions, and the range of careers that biomedical doctoral recipients are pursuing. There is also increasing recognition of the need to enhance the reproducibility of biomedical research results through scientific rigor and transparency, and the skills of mentors to effectively engage a more diverse trainee population.

Each proposed program should provide rigorous research training, and mentored research experiences, and are expected to help trainees develop:

- The skills to independently acquire the knowledge needed to advance their chosen field;
- The ability to think critically and independently, and to identify important research questions and approaches that push forward the boundaries
 of their areas of study;
- · An understanding of the health-related sciences and the relationship of their research training to health and disease;
- A strong foundation in scientific reasoning, rigorous and reproducible research design, experimental methods, quantitative and computational approaches, and data analysis and interpretation;
- The skills to conduct research in the safest manner possible, and a commitment to approaching biomedical research responsibly, ethically, and with integrity;
- Experience initiating, conducting, interpreting and presenting rigorous and reproducible research with increasing self-direction;
- The ability to work effectively in teams with colleagues from a variety of cultural and scientific backgrounds and to promote inclusive and supportive scientific research environments;
- The skills to teach and communicate scientific research methodologies and findings to a wide variety of audiences (e.g., discipline-specific, across disciplines, and the public); and
- The knowledge, professional skills, and experiences required to identify and transition into careers in the biomedical research workforce.

Program Considerations

This NOFO is intended to support rigorous research training programs that will promote the development of a biomedical research workforce that will benefit from the full range of perspectives, experiences and backgrounds needed to advance and translate discovery for the benefit of all. NIH expects organizations to engage in outreach and recruitment activities to encourage individuals from diverse backgrounds, including individuals from underrepresented groups (see the <u>Notice of NIH's Interest in Diversity (https://grants.nih.gov/grants/guide/notice-files/NOT-OD-20-031.html</u>)) to participate in the program. Consistent with existing NIH practices and applicable law: (1) Funded programs may not use the race, ethnicity, or sex (including gender identity, sexual orientation, or transgender status) of a trainee or faculty candidate as an eligibility or selection criterion, and (2) NIH does not use the race, ethnicity, or sex of trainee candidates, trainees, or faculty in the application review process or funding decisions. Applicants and award recipients are encouraged to consult with their General Counsel to ensure all applicable laws and regulations are being followed in program design and implementation.

Applicants are expected to identify unique training goals and objectives (i.e., specific and measurable outcomes the program intends to achieve) and develop plans to implement evidence-informed training and mentoring activities (i.e., approaches that are grounded in the literature and from evaluations of existing relevant training programs) to address those needs and objectives.

Inclusive, Safe, Accessible and Supportive Research Training Environments that Promote Scientific Rigor

Funded programs are expected to implement robust plans to develop inclusive, safe, accessible, and supportive research training environments to maximize success for all individuals in the training program. Specifically, funded programs should have institutional and departmental environments where individuals from all backgrounds, including those from underrepresented groups, are welcomed and feel integrated into and supported by the biomedical research community. Funded programs are also expected to implement plans to enhance trainee retention (i.e., to sustain the scientific interests and participation of trainees from all backgrounds), which may be integrated with plans for mentor training (see below). Safety in research training environments should encompass:

- Environments free from <u>harassment</u>, <u>bullying and intimidation (https://grants.nih.gov/grants/policy/harassment.htm</u>), in which everyone participating is treated in a respectful and supportive manner,
- Laboratory and clinical settings where individuals exercise the highest standards of practice for chemical, biological and physical safety (for more information see examples of <u>Laboratory Safety Training Guidelines (https://nigms.nih.gov/training/Pages/Laboratory-Safety-Training-and-Guidelines.aspx</u>)), and
- Practices at the institutional leadership and research community levels that demonstrate core values and behaviors to emphasize safety over competing goals.

Biomedical research and the resulting scientific knowledge are increasingly complex, multidisciplinary, and collaborative in nature. Training PDs/PIs are encouraged to develop institutional training programs that will provide trainees with education and experience in a variety of rigorous and reproducible scientific approaches, systems for study, tools, and technologies. Consideration of team-based research approaches may also be warranted depending upon the goals of the proposed training program. Funded training programs must ensure that trainees have a solid foundation in methods to enhance data reproducibility through rigor and transparency (for examples, see <u>NIH Rigor and Reproducibility Training</u> (https://www.nih.gov/research-training/rigor-reproducibility/training)).

Mentor Training

Effective mentorship is critical to the development and retention of scientists and the advancement of research. Studies have shown that effective mentorship has overall positive effects on mentees, mentors and the overall research environment (e.g., improved academic achievement, retention, and degree attainment, career satisfaction, career commitment of trainees from all backgrounds, and enhanced integration of trainees from underrepresented groups into the biomedical academic community; see National Academies of Sciences, Engineering, and Medicine 2019, The Science of Effective Mentorship in STEMM (https://www.nationalacademies.org/our-work/the-science-of-effective-mentoring-in-stemm)). Formal training, and ongoing professional development in effective mentoring practices has been shown to improve the knowledge and skills of research mentors across career stages.

Funded training programs are expected to support effective mentorship by ensuring all program faculty complete formal mentor training and periodic refreshers. Programs should consider the following as potential mentor training components, and are encouraged to adapt to program and trainee needs:

- Aligning expectations.
- · Maintaining effective communication.
- Fostering independence.
- Assessing understanding.
- Enhancing professional development.
- Addressing equity and inclusion.
- Articulating a mentoring philosophy and plan.

Trainee Career Development

Scientists supported by NRSA training programs pursue a wide variety of careers in the biomedical research workforce in a variety of sectors. These include research-intensive careers in academia, industry and government, and research-related careers in academic institutions, government agencies, for-profit businesses, and private foundations that directly benefit the broader biomedical research enterprise. Training PDs/PIs should make available appropriate skills training so that trainees are prepared to apply for subsequent independent support for their training, career development or research program (e.g., an individual fellowship award, mentored career development award, or research project grant), as appropriate for their career stage and interest. Training programs should also make available structured career development opportunities (e.g., workshops, individual development plans, informational interviews, shadowing, internships) so that trainees will obtain a working knowledge of various potential career paths that would make strong use of the knowledge and skills gained during research training, and the steps, experiences, networks, and credentials required to transition successfully to the next stage of their chosen career.

Considerations for Clinicians and Dual-degree Students

Past studies have shown that health professional trainees who train in programs with postdoctoral researchers who have intensive research backgrounds are more likely to work with their institutions to apply for and receive subsequent research grant support. Programs that emphasize research training for individuals with the MD or other health-professional degrees are therefore encouraged to develop interactions with basic science departments and include trainees with research doctorates when this approach is consistent with the goals of the proposed training program.

Institutional research training grants must be used to support a program of full-time research training. Within the full-time training period, research trainees who are also training as clinicians must devote their time to the proposed research training and confine clinical duties to those that are an integral part of the research training experience or can be conducted in the allowable additional 25% of their time (e.g., 10 hours per week) that may be devoted to clinical employment. The program may not be used to support studies leading to the MD, DDS, or other clinical, health-professional degrees except when those studies are part of a formal combined research degree program, such as the MD/PhD. Similarly, trainees may not accept NRSA support for clinical training that is part of residency training leading to clinical certification in a medical or dental specialty or subspecialty. It is permissible and encouraged, however, for clinicians to engage in NRSA-supported, full-time postdoctoral research training even when that experience is creditable toward certification by a clinical specialty or subspecialty board.

Other Considerations

Institutional commitment and support for the proposed training program are important elements of the application. The research training program may complement and synergize with other ongoing federally supported research training and career development programs at the applicant institution (e.g., in the development of skills needed for careers in the biomedical research workforce that are not discipline-specific); however, the research training goals and objectives must be distinct from related programs at the same institution currently receiving federal support. Funded programs are expected to provide evidence of accomplishing the training goals in progress reports and upon renewal, to make aggregate data on training and career outcomes publicly available, and are strongly encouraged to disseminate successful training practices to the broader training community. Training grant funds may not be used solely as a vehicle to provide stipends for trainees to conduct research.

The duration of training, the transition of trainees to individual support mechanisms, and their transition to the next career stage are important considerations in institutional training programs. Also, an important consideration is the engagement of trainees in their training goals, process and activities through the program that enhances what they may be getting in existing programs within the institution. Training PD/PIs should limit appointments to individuals who plan to remain in the training program for no less than two years, whether that support comes from a training grant or some combination of NRSA and non-NRSA programs institution.

Short-term training is not intended, and may not be used, to support activities that would ordinarily be part of a research degree program, nor for any undergraduate-level training. Short-term positions should be requested at the time of application, as described in the <u>NIH Grants Policy Statement</u> (<u>https://grants.nih.gov/grants/policy/nihgps/HTML5/section_11/11.1_general.htm</u>). Research training programs solely for short-term research training should not apply to this announcement, but rather the T35 NRSA NOFO, which can be found in the <u>NIH Training Kiosk</u>. (<u>https://researchtraining.nih.gov/programs/training-grants</u>)

This Notice of Funding Opportunity (NOFO) does not support of Trainees to lead an independent clinical trial, but does allow them to obtain research experience in a clinical trial led by a mentor or co-mentor. NIH strongly supports training towards a career in clinically relevant research and so gaining experience in clinical trials under the guidance of a mentor or co-mentor is encouraged.

Special Note: Because of the differences in individual Institute and Center (IC) program requirements for this NOFO, prospective applicants **MUST** consult the <u>Table of IC-Specific Information, Requirements and Staff Contacts (https://grants.nih.gov/guide/contacts/PA-25-168.html</u>), to make sure that their application is appropriate for the requirements of one of the participating NIH ICs. Prior consultation with NIH staff is strongly encouraged.

See Section VIII. Other Information for award authorities and regulations.

Section II. Award Information

Funding Instrument	Grant: A <u>financial assistance</u> mechanism providing money, property, or both to an eligible entity to carry out an approved project or activity.
Application Types Allowed	New Renewal Resubmission Revision
	The <u>OER Glossary (//grants.nih.gov/grants/guide/url_redirect.php?id=11116)</u> and the <u>How to</u> <u>Apply Application Guide, (//grants.nih.gov/grants/guide/url_redirect.php?id=82400)</u> provide details on these application types. Only those application types listed here are allowed for this NOFO.
Clinical Trial?	Not Allowed: Only accepting applications that do not propose clinical trials. Note: Appointed Trainees are permitted to obtain research experience in a clinical trial led by a

mentor or co-mentor.

<u>Need help determining whether you are doing a clinical trial?</u> (https://grants.nih.gov/grants/guide/url_redirect.php?id=82370)

Funds Available and Anticipated Number of Awards	The number of awards is contingent upon NIH appropriations and the submission of a sufficient number of meritorious applications.
Award Budget	Application budgets are not limited, but need to reflect the actual needs of the proposed project.
	Recipients are expected to be familiar with and comply with applicable cost policies and the NRSA Guidelines (<u>NIH Grants Policy Statement - Institutional Research Training Grants</u> (<u>//grants.nih.gov/grants/guide/url_redirect.php?id=41126</u>)). Funds may be used only for those expenses that are directly related to and necessary for the research training and must be expended in conformance with OMB Cost Principles, the <u>NIH Grants Policy Statement</u> (<u>//grants.nih.gov/grants/guide/url_redirect.php?id=11120</u>), and the NRSA regulations, policies, guidelines, and conditions set forth in this document.
Award Project Period	Awards for T32 institutional NRSA research training grants may be for project periods up to five years in duration and are renewable.

Other Award Budget Information

Stipends, Tuition, and Fees	Ruth L. Kirschstein-NRSA awards provide stipends as a subsistence allowance to help defray living expenses during the research training experience.
	NIH will contribute to the combined cost of tuition and fees at the rate in place at the time of award.
	Stipend levels, as well as funding amounts for tuition and fees and the institutional allowance are announced annually in the <i>NIH Guide for Grants and Contracts</i> and are also posted on the Ruth L. Kirschstein National Research Service Award (NRSA) <u>webpage</u> (<u>https://researchtraining.nih.gov/resources/policy-notices</u>).
Trainee Travel	Travel for trainees to attend scientific meetings and workshops that the institution determines to be necessary for the individual's research training experience is an allowable expense for predoctoral and postdoctoral trainees. This includes trainees on short-term appointments. Trainees must be appointed to the training grant at the time of the actual travel for this to be an allowable cost.
	The amount of funds provided for trainee travel may vary by NIH Institute or Center; applicants are encouraged to consult the <u>Table of IC-Specific Information, Requirements and Staff Contacts</u> (<u>https://grants.nih.gov/guide/contacts/PA-25-168.html</u>) for further information.
Training Related Expenses	NIH will provide funds to help defray other research training expenses, such as health insurance, staff salaries, consultant costs, mentor training activities, equipment, research supplies, and faculty/staff travel directly related to the research training program. The most recent levels of training related expenses are announced annually in the <i>NIH Guide for Grants and Contracts</i> , and are also posted on the Ruth L. Kirschstein National Research Service Award (NRSA) webpage

(https://researchtraining.nih.gov/resources/policy-notices).

Indirect Costs

Indirect Costs (also known as Facilities & Administrative [F&A] Costs) are reimbursed at 8% of modified total direct costs (exclusive of tuition and fees, consortium costs in excess of \$25,000, and expenditures for equipment), rather than on the basis of a negotiated rate agreement.

NIH grants policies as described in the <u>NIH Grants Policy Statement (//grants.nih.gov/grants/guide/url_redirect.php?id=11120</u>) will apply to the applications submitted and awards made from this NOFO.

Section III. Eligibility Information

1. Eligible Applicants

Eligible Organizations

Higher Education Institutions

- Public/State Controlled Institutions of Higher Education
- Private Institutions of Higher Education

The following types of Higher Education Institutions are always encouraged to apply for NIH support as Public or Private Institutions of Higher Education:

- Hispanic-serving Institutions
- Historically Black Colleges and Universities (HBCUs)
- Tribally Controlled Colleges and Universities (TCCUs)
- Alaska Native and Native Hawaiian Serving Institutions
- Asian American Native American Pacific Islander Serving Institutions (AANAPISIs)

Nonprofits Other Than Institutions of Higher Education

- Nonprofits with 501(c)(3) IRS Status (Other than Institutions of Higher Education)
- Nonprofits without 501(c)(3) IRS Status (Other than Institutions of Higher Education)

Local Governments

- Indian/Native American Tribal Governments (Federally Recognized)
- Indian/Native American Tribal Governments (Other than Federally Recognized)
- U.S. Territory or Possession

Other

- · Native American Tribal Organizations (other than Federally recognized tribal governments)
- · Faith-based or Community-based Organizations

Federal Governments

- · Eligible Agencies of the Federal Government
- U.S. Territory or Possession

The sponsoring institution must assure support for the proposed program. Appropriate institutional commitment to the program includes the provision of adequate staff, facilities, and educational resources that can contribute to the planned program.

Foreign Organizations

Non-domestic (non-U.S.) Entities (Foreign Institutions) are not eligible to apply.

Non-domestic (non-U.S.) components of U.S. Organizations are not eligible to apply.

Required Registrations Applicant Organizations

Applicant organizations must complete and maintain the following registrations as described in the <u>How to Apply - Application Guide</u> (<u>https://grants.nih.gov/grants/guide/url_redirect.php?id=82400</u>), (//grants.nih.gov/grants/guide/url_redirect.php?id=82400) to be eligible to apply for or receive an award. All registrations must be completed prior to the application being submitted. Registration can take 6 weeks or more, so applicants should begin the registration process as soon as possible. Failure to complete registrations in advance of a due date is not a valid reason for a late submission, please reference <u>NIH Grants Policy Statement Section 2.3.9.2 Electronically Submitted Applications</u> (//grants.nih.gov/grants/guide/url_redirect.php?id=82423) for additional information.

- <u>System for Award Management (SAM) (https://grants.nih.gov/grants/guide/url_redirect.php?id=82390)</u> Applicants must complete and maintain an active registration, which requires renewal at least annually. The renewal process may require as much time as the initial registration. SAM registration includes the assignment of a Commercial and Government Entity (CAGE) Code for domestic organizations which have not already been assigned a CAGE Code.
- <u>NATO Commercial and Government Entity (NCAGE) Code (//grants.nih.gov/grants/guide/url_redirect.php?id=11176)</u> Foreign organizations
 must obtain an NCAGE code (in lieu of a CAGE code) in order to register in SAM.
- Unique Entity Identifier (UEI)- A UEI is issued as part of the SAM.gov registration process. The same UEI must be used for all registrations, as well as on the grant application.
- <u>eRA Commons (https://grants.nih.gov/grants/guide/url_redirect.php?id=11123)</u> Once the unique organization identifier is established, organizations can register with eRA Commons in tandem with completing their Grants.gov registration; all registrations must be in place by time of submission. eRA Commons requires organizations to identify at least one Signing Official (SO) and at least one Program Director/Principal Investigator (PD/PI) account in order to submit an application.
- <u>Grants.gov (//grants.nih.gov/grants/guide/url_redirect.php?id=82300)</u> Applicants must have an active SAM registration in order to complete the Grants.gov registration.

Program Directors/Principal Investigators (PD(s)/PI(s))

All PD(s)/PI(s) must have an eRA Commons account. PD(s)/PI(s) should work with their organizational officials to either create a new account or to affiliate their existing account with the applicant organization in eRA Commons. If the PD/PI is also the organizational Signing Official, they must have two distinct eRA Commons accounts, one for each role. Obtaining an eRA Commons account can take up to 2 weeks.

Eligible Individuals (Program Director/Principal Investigator)

Any individual(s) with the skills, knowledge, and resources necessary to carry out the proposed research training program as the Training Program Director/Principal Investigator (Training PD/PI) is invited to work with their organization to develop an application for support. Individuals from diverse backgrounds, including individuals from underrepresented racial and ethnic groups, individuals with disabilities, and women are always encouraged to apply for NIH support. See, Reminder: Notice of NIH's Encouragement of Applications Supporting Individuals from Underrepresented Ethnic and Racial Groups as well as Individuals with Disabilities, <u>NOT-OD-22-019 (https://grants.nih.gov/grants/guide/notice-files/NOT-OD-22-019.html)</u>.

For institutions/organizations proposing multiple PDs/PIs, visit the <u>Multiple Program Director/Principal Investigator Policy</u> (//grants.nih.gov/grants/multi_pi/index.htm) and submission details in the Senior/Key Person Profile (Expanded) Component of the <u>How to Apply - Application Guide (https://grants.nih.gov/grants/guide/url_redirect.php?id=82400)</u>.

The PD/PI should be an established investigator in the scientific area in which the application is targeted and capable of providing both administrative and scientific leadership to the development and implementation of the proposed program. The PD/PI will be responsible for the selection and appointment of trainees to the approved research training program, and for the overall direction, management, administration, and evaluation of the program. The PD/PI will be expected to monitor and assess the program and submit all documents and reports as required. The PD/PI has responsibility for the day-to-day administration of the program and is responsible for appointing members of the Advisory Committee (when applicable), using their recommendations to determine the appropriate allotment of funds. Additional PDs/PIs, including individuals with experience in areas relevant to the program goals may be included to achieve the training goals.

2. Cost Sharing

This NOFO does not require cost sharing as defined in the <u>NIH Grants Policy Statement Section 1.2 Definition of Terms</u> (<u>//grants.nih.gov/grants/guide/url_redirect.php?id=11126</u>).

3. Additional Information on Eligibility

Number of Applications

Applicant organizations may submit more than one application, provided that each application is programmatically distinct.

NIH will not accept duplicate or highly overlapping applications under review at the same time per <u>NIH Grants Policy Statement Section 2.3.7.4</u> <u>Submission of Resubmission Application (//grants.nih.gov/grants/guide/url_redirect.php?id=82415)</u>. This means that the NIH will not accept:

- A new (A0) application that is submitted before issuance of the summary statement from the review of an overlapping new (A0) or resubmission (A1) application.
- A resubmission (A1) application that is submitted before issuance of the summary statement from the review of the previous new (A0) application.
- An application that has substantial overlap with another application pending appeal of initial peer review (see <u>NIH Grants Policy Statement</u> <u>2.3.9.4 Similar, Essentially Identical, or Identical Applications (//grants.nih.gov/grants/guide/url_redirect.php?id=82423)</u>)

Preceptors/Mentors

Program faculty should be active researchers in the biomedical sciences as demonstrated by recent publications and research support in the area of the proposed research training program. Programs are encouraged to recruit prospective preceptors/mentors from a wide variety of backgrounds, for example, faculty from underrepresented groups (see <u>Notice of NIH's Interest in Diversity (https://grants.nih.gov/grants/guide/notice-files/NOT-OD-20-031.html</u>)) and faculty at different career stages (for example, early stage investigators as well as senior faculty). When building a training team, programs should include faculty who are committed to training, mentoring, and providing inclusive, safe, accessible, and supportive research training environments. All program faculty should have a mentoring philosophy appropriately tailored to the needs of potential trainees that ensures trainees will receive the tailored mentorship needed to develop skills and advance their career. Program faculty should also have sufficient time to commit to training given their other professional obligations.

Trainees

The applicant organization will select the trainees to be supported by the research training program and is responsible for establishing trainee eligibility and selection criteria that are consistent with applicable law.

The individual to be trained must be a citizen or a noncitizen national of the United States or have been lawfully admitted for permanent residence at the time of appointment. Additional details on citizenship, training period, and aggregate duration of support are available in the <u>NIH Grants Policy</u> <u>Statement (//grants.nih.gov/grants/guide/url_redirect.php?id=61131)</u>.

All trainees are required to pursue their research training full time, normally defined as 40 hours per week, or as specified by the sponsoring institution in accordance with its own policies. Appointments are normally made in 12-month increments, and no trainee may be appointed for less than 9 months during the initial period of appointment, except with prior approval of the awarding unit, or when trainees are appointed to approved, short-term training positions.

Predoctoral trainees. Predoctoral trainees must be enrolled in a program leading to a PhD or in an equivalent research doctoral degree program. Health-professional students who wish to interrupt their studies for a year or more to engage in full-time research training before completing their formal training programs, are also eligible.

Postdoctoral trainees. Postdoctoral trainees must have received, as of the beginning date of the NRSA appointment, a Ph.D., M.D., D.D.S., or comparable doctoral degree from an accredited domestic or foreign institution. Comparable doctoral degrees include, but are not limited to, the following: D.M.D., DC, DO, DVM., OD, DPM, ScD, EngD, DrPH, DNSc, DPT, PharmD, ND (Doctor of Naturopathy), DSW, PsyD, as well as a doctoral degree in nursing research. Documentation by an authorized official of the degree-granting institution certifying all degree requirements have been met prior to the beginning date of the training appointment is acceptable. Individuals in postgraduate clinical training, who wish to interrupt their studies for a year or more to engage in full-time research training before completing their formal training programs, are also eligible.

Short-term trainees.

Section IV. Application and Submission Information

1. Requesting an Application Package

The application forms package specific to this opportunity must be accessed through ASSIST, Grants.gov Workspace or an institutional system-tosystem solution. Links to apply using ASSIST or Grants.gov Workspace are available in Part 1 of this NOFO. See your administrative office for instructions if you plan to use an institutional system-to-system solution.

2. Content and Form of Application Submission

It is critical that applicants follow the Training (T) Instructions in the <u>How to Apply - Application Guide</u> (<u>https://grants.nih.gov/grants/guide/url_redirect.php?id=82400</u>) except where instructed in this Notice of Funding Opportunity to do otherwise. Conformance to the requirements in the <u>How to Apply - Application Guide (https://grants.nih.gov/grants/guide/url_redirect.php?id=82400</u>) is required and strictly enforced. Applications that are out of compliance with these instructions may be delayed or not accepted for review.

Page Limitations

All page limitations described in the <u>How to Apply - Application Guide (https://grants.nih.gov/grants/guide/url_redirect.php?id=82400)</u> and the <u>Table of</u> <u>Page Limits (//grants.nih.gov/grants/guide/url_redirect.php?id=11133)</u> must be followed.

Instructions for Application Submission

The following section supplements the instructions found in the <u>How to Apply - Application Guide</u> (<u>https://grants.nih.gov/grants/guide/url_redirect.php?id=82400</u>) and should be used for preparing an application to this NOFO.

SF424(R&R) Cover

All instructions in the How to Apply - Application Guide (https://grants.nih.gov/grants/guide/url_redirect.php?id=82400) must be followed.

SF424(R&R) Project/Performance Site Locations

All instructions in the How to Apply - Application Guide (https://grants.nih.gov/grants/guide/url_redirect.php?id=82400) must be followed.

SF424 (R&R) Other Project Information

All instructions in the How to Apply - Application Guide (https://grants.nih.gov/grants/guide/url_redirect.php?id=82400) must be followed.

Project Summary/Abstract. Provide an abstract of the entire application. Include the goals, objectives, rationale and design of the research training/career development program, as well as key activities in the training plan. Indicate the planned duration of appointments, the projected number of trainees/scholars including their levels (i.e., predoctoral, postdoctoral, short-term), and intended trainee/scholar outcomes.

Other Attachments. An Advisory Committee is not a required, but a highly recommended component of a training program. However, if an Advisory Committee is intended, provide a plan for the appointment of an Advisory Committee to monitor progress of the training program. The composition, roles, responsibilities, and desired expertise of committee members, frequency of committee meetings, and other relevant information should be included. Describe how the Advisory Committee will evaluate the overall effectiveness of the program. Proposed Advisory Committee members should be named in the application if they have been invited to participate at the time the application is submitted. Renewal applications with Advisory Committee should include the names of all committee members during the past project period. Please name your file "Advisory_Committee.pdf".

The filename provided for each "Other Attachment" will be the name used for the bookmark in the electronic application in eRA Commons.

SF424(R&R) Senior/Key Person Profile Expanded

Follow all instructions provided in the How to Apply - Application Guide (https://grants.nih.gov/grants/guide/url_redirect.php?id=82400).

PHS 398 Cover Page Supplement

Follow all instructions provided in the How to Apply - Application Guide (https://grants.nih.gov/grants/guide/url_redirect.php?id=82400).

PHS 398 Training Subaward Budget Attachment(s)

Follow all instructions provided in the How to Apply - Application Guide (https://grants.nih.gov/grants/guide/url_redirect.php?id=82400).

Training Budget

Follow all instructions provided in the <u>How to Apply - Application Guide (https://grants.nih.gov/grants/guide/url_redirect.php?id=82400</u>) with the following additional modifications:

• Include all personnel other than the Training PD(s)/PI(s) in the Other Personnel section, including clerical and administrative staff.

PHS 398 Research Training Program Plan

The PHS 398 Research Training Program Plan Form is comprised of the following sections:

- Training Program
- Faculty, Trainees, and Training Record
- Other Training Program
- Appendix Note that the Appendix should only be used in circumstances covered in the NIH policy on appendix materials or if the NOFO specifically instructs applicants to do so.

Follow all instructions provided in the How to Apply - Application Guide (https://grants.nih.gov/grants/guide/url_redirect.php?id=82400).

The following modifications apply:

Particular attention must be given to the required <u>Training Data Tables (//grants.nih.gov/grants/guide/url_redirect.php?id=61169</u>). Applicants should summarize, in the body of the application, key data from the tables that highlight the characteristics of the prospective candidate pool, faculty mentors, the educational and career outcomes of past participants, and other factors that contribute to the overall environment of the program.

Training Program

In addition to the information specified in the Application Guide, describe the following for each section of the Program Plan attachment:

Background

The application should clearly describe the goals (i.e., broad statement of purpose of the program), and objectives (i.e., specific measurable outcomes the program intends to achieve) of the proposed research training program. The program-specific goals and objectives should align with the Program Objective of this funding announcement while focusing on developing the specific skills required to be a well-trained scientist in the proposed scientific discipline(s).

The application should describe how the program will develop a diverse pool of well-trained scientists who have the technical, operational, and professional skills required to conduct research in a safe, ethically responsible and rigorous manner, and to enter careers in the biomedical research workforce as delineated in the Program Objective. The application should describe how the program will enhance the training environment and not simply provide financial support to trainees.

Program Plan

Program Administration (Training Program Director(s)/Principal Investigator(s))

The application should describe how the Training Program Director(s)/Principal Investigator(s) (PDs/PIs) will promote the success of the trainees and training program. Multiple PDs/PIs are encouraged, particularly when each brings a unique perspective and skill set that will enhance training. The application should expand on the information in the biosketch(es) to address how the PD/PI or PD/PI team has:

- The appropriate expertise (for example, a record of rigorous research), as well as the administrative and training experience to provide strong leadership, direction, management, and administration of the proposed research training program.
- The time to commit sufficient effort to ensure the program's success, given other professional obligations (applicants should indicate the program director's percent effort in the proposed program).
- A demonstrated commitment to training future biomedical research researchers.
- Received training (or have a plan in place to ensure they receive training) on how to effectively mentor trainees from all backgrounds including trainees from groups underrepresented in the biomedical sciences (e.g., see <u>Notice of NIH's Interest in Diversity</u> (<u>https://grants.nih.gov/grants/guide/notice-files/NOT-OD-20-031.html</u>)) prior to the start of the program.

This section should describe how previous mentoring experiences of the PD(s)/PI(s) will support the success of the proposed training program.

Program Faculty

The application should describe (a) the faculty participants and (b) planned mentor training and oversight.

Faculty Participants, please describe:

• The efforts made to recruit a pool of prospective program faculty from a wide variety of backgrounds, for example, faculty from underrepresented groups, and a range of career stages and scientific disciplines relevant to the training goals, to provide potential role models within the training program and to enhance the training environment.

Mentor Training and Oversight, please describe:

- The planned strategy and administrative structure to oversee and monitor the program and ensure appropriate and timely trainee progress. This should include a mechanism to monitor mentoring, including oversight of the effectiveness of the trainee/participating faculty match, and a plan for removing faculty who continue to display unacceptable mentorship qualities from the training program.
- How the participating faculty are trained to ensure the use of evidence-informed mentoring practices that promote the development of trainees
 from all backgrounds, including trainees from groups underrepresented in the biomedical sciences. Include the planned format, duration, and
 frequency of mentor training activities for program faculty and a description of how mentor training has been tailored to the goals and
 objectives of the broader training program. Describe the major topics covered in mentor training. Examples of relevant topics include, but are
 not limited to:
 - Aligning expectations.
 - Maintaining effective communication.
 - Fostering independence.
 - Assessing scholars' understanding of scientific research.
 - Enhancing professional development.
 - Addressing equity and inclusion.
 - Articulating your mentoring philosophy and plan.

Proposed Training

In addition to the information specified in the Application Guide, describe:

- How the training activities will employ evidence-informed approaches to trainee learning, mentorship, inclusion, and professional development, and how these activities will address the program's training goals and objectives.
- How trainees will be instructed on data science principles that are relevant to their areas of research. Examples include statistics, computational science, bioinformatics, data sharing and access, data management, data security, and data privacy in human subjects research.

Career Development

The proposed training should include a section on career development activities for trainees involved in the program, and should describe:

- How the pool of potential applicants and trainees will be provided with information about the overall biomedical research workforce employment landscape, the variety of careers in the biomedical research workforce for which their training would be useful, and the career outcomes of graduates of the program (e.g., on publicly accessible websites).
- How the proposed program will engage a range of potential employers to ensure the trainees will acquire the appropriate skills, knowledge, and steps needed to attain positions in the sectors of the biomedical research workforce that are of interest to them and consistent with their values.

• How the training program or institution will provide appropriate experiential learning opportunities (e.g., internships, shadowing, informational interviews, teaching opportunities) that allow trainees to develop the professional skills and networks necessary to transition into careers in the biomedical research workforce.

Training Program Evaluation

The application should describe:

- How the proposed evaluation will assess the extent to which the overall program is effective in meeting its training goals and objectives, and whether the research training environment is inclusive and supportive of trainee development.
- The program's procedures for responding to program evaluation findings.

Trainee Candidates and Retention Plans

Through the narrative and summaries of the information presented in the <u>Training Data Tables (https://grants.nih.gov/grants/forms/data-tables.htm</u>) and the attachments, the application should:

- Provide a strong justification for the number of requested trainee positions.
- Describe a multifactorial candidate review process (i.e., a process that considers metrics beyond previous institution, GPA, and standardized test scores) that will allow a broad group of research-oriented trainees who have taken advantage of the research opportunities available to them and are committed to contributing to the biomedical research enterprise the ability to participate in the training program. Programs are encouraged to consider individuals who have the potential to strongly benefit from, and with proper training and support, succeed in the program (see also, Program Considerations in section I above).

Retention Plans

Describe efforts to sustain the scientific interests as well as monitor the academic and research progress of trainees from all backgrounds within the program (i.e., retention), including those from underrepresented groups. Applicants are encouraged to consult the NIH's website to identify promising retention practices (https://extramural-diversity.nih.gov/building-participation/recruitment-retention) and to use evidence-informed practices for retention with the recognition that the variety of trainee backgrounds and experiences may necessitate the need to tailor retention approaches. Describe the specific efforts to be undertaken by the training program and how these might coordinate with broader trainee retention efforts of the institution(s).

Institutional Environment and Commitment to Training

• The application should describe how the level of institutional and departmental commitment to research training will promote the success of the trainees and training program. This includes providing an inclusive, safe and supportive environment with procedures to ensure accountability and reporting of concerns. For institutions that have multiple NIH-funded training grants, the letter should also explain what distinguishes the proposed program from existing ones at the same training level, how the programs will synergize and share resources when appropriate, and how the training faculty, pool of potential trainees, and resources are sufficiently robust to support the proposed program in addition to existing ones. A letter providing assurances of the institutional commitment should be provided in the Letters of Support section of the application. Detailed instructions on the types of support are found below in the Letters of Support section of the NOFO. Do not repeat information contained elsewhere in the application.

Training Outcomes

This section is intended to provide outcomes for the program described in the application (or for new programs, to provide outcomes for recent graduates in similar training to the proposed program). The application should provide the information below about recent outcomes through narrative descriptions and a summary of the data presented in the required <u>training tables (https://grants.nih.gov/grants/forms/data-tables.htm)</u>. The application should describe the following:

- Evidence that recent program graduates conducted rigorous research that advanced scientific knowledge and/or technologies, with increasing self-direction (e.g., peer-reviewed publications in <u>Training Table 5 (https://grants.nih.gov/grants/forms/data-tables.htm</u>), or other measures of scientific accomplishment appropriate to the field);
- The rate of program completion and length of training (for predoctoral trainees, explain how time-to-degree <u>Training Table 8</u> (<u>https://grants.nih.gov/grants/forms/data-tables.htm</u>)).
- The success of recent graduates transitioning to careers in the biomedical research workforce (<u>Training Table 8</u>). (<u>https://grants.nih.gov/grants/forms/data-tables.htm</u>)

If disparities are observed in trainee outcomes, describe approaches to identify the causes and, where warranted, the approaches to feasibly address the issues in the Program Plan.

Progress Report for Renewal Applications

For renewal applications include information in the "Program Overview" section to demonstrate that the program successfully trained a diverse pool of

individuals who have the technical, operational, and professional skills to transition into careers in the biomedical research workforce. Highlight how the training program has evolved in response to changes in relevant scientific and technical knowledge, educational practices, and evaluation of the training program. Describe successes and challenges with implementation of the programmatic elements described in the previous application (e.g., curricular elements, mentor training activities, efforts to promote inclusive, safe, accessible and supportive research training environments) and provide justifications for failing to implement previously proposed programmatic elements. Include success rates for graduation and successful transitions to postdoc or careers in the biomedical research workforce and describe how the program made aggregate data on training and career outcomes publicly available.

Faculty, Trainees, and Training Record

Participating Faculty Biosketches

Program faculty are encouraged to provide a personal statement that describes their prior experience with:

- Training, mentoring, and promoting an inclusive and supportive scientific environment.
- Providing training in rigorous and unbiased experimental design, methodology, analysis, interpretation, and reporting of results.
- Aiding and supporting trainees in identifying and transitioning into careers in the biomedical research workforce that are consistent with trainees' skills, interests, and values.

Letters of Support

Institutional Support Letter. The application must include a signed letter on institutional letterhead from a President, Provost, Dean or key institutional leader that describes the activities and resources provided by the institution that will ensure the success of the planned training program and the productivity of its trainees (not to exceed 10 pages). Institutional commitment to the following areas must also be described in the letter:

- Developing and promoting a culture in which the highest standards of scientific rigor, reproducibility and responsible conduct are advanced.
- Ensuring sufficient resources and support will be available to the training faculty and trainees, for example, to permit early stage faculty to participate in training and trainees to continue in training if their mentors experience a hiatus in research funding.
- Supporting core facilities and technology resources and describing how they can be used to enhance training.
- Providing adequate staff, facilities, and educational resources to the planned program.
- Supporting the PDs/PIs and other key staff associated with the planned training program; ensuring faculty have protected time available to devote to mentoring, training and research; considering activities integral to excellent training (such as teaching and mentorship) in tenure and promotion decisions.
- Promoting safe, accessible, and inclusive and supportive research training environments at all levels (trainees, staff, faculty, and leadership); ensuring the research facilities and laboratory practices promote the safety of trainees (see The NIH Grants Policy Statement <u>Section 4</u> (<u>https://grants.nih.gov/grants/policy/nihgps/HTML5/section 4/4 public policy requirements objectives and other appropriation mandates.htm</u>) regarding NIH recipient institutions expectations to provide safe and healthful working condition for their employees and foster work environments conducive to high-quality research); ensuring the research facilities are accessible to trainees with disabilities; ensuring a positive, supportive, and inclusive research and training environment for individuals from all backgrounds.
- Ensuring that proper policies, procedures, and oversight are in place to prevent discrimination, harassment and other discriminatory practices and to appropriately respond to allegations of such discriminatory practices, including providing any required notifications to NIH (see <u>NOT-OD-</u> <u>20-124 (https://grants.nih.gov/grants/guide/notice-files/NOT-OD-20-124.html</u>)).
- Providing the types and levels of support necessary for trainees to successfully complete the research training program.
- Supporting evaluation of the training program and procedures for responding to evaluation findings.

Other Training Program Section

Appendix:

Limited items are allowed in the Appendix. Follow all instructions for the Appendix as described in the <u>How to Apply - Application Guide</u> (<u>https://grants.nih.gov/grants/guide/url_redirect.php?id=82400</u>); any instructions provided here are in addition to the <u>How to Apply - Application Guide</u> (<u>https://grants.nih.gov/grants/guide/url_redirect.php?id=82400</u>); any instructions.

PHS Assignment Request Form

All instructions in the How to Apply - Application Guide (https://grants.nih.gov/grants/guide/url_redirect.php?id=82400) must be followed.

3. Unique Entity Identifier and System for Award Management (SAM)

See Part 2. Section III.1 for information regarding the requirement for obtaining a unique entity identifier and for completing and maintaining active registrations in System for Award Management (SAM), NATO Commercial and Government Entity (NCAGE) Code (if applicable), eRA Commons, and Grants.gov

4. Submission Dates and Times

Part I. contains information about Key Dates and times. Applicants are encouraged to submit applications before the due date to ensure they have time to make any application corrections that might be necessary for successful submission. When a submission date falls on a weekend or <u>Federal holiday (https://grants.nih.gov/grants/guide/url_redirect.php?id=82380</u>), the application deadline is automatically extended to the next business day.

Organizations must submit applications to <u>Grants.gov (//grants.nih.gov/grants/guide/url_redirect.php?id=11128</u>) (the online portal to find and apply for grants across all Federal agencies). Applicants must then complete the submission process by tracking the status of the application in the <u>eRA</u> <u>Commons (https://grants.nih.gov/grants/guide/url_redirect.php?id=11123</u>), NIH's electronic system for grants administration. NIH and Grants.gov systems check the application against many of the application instructions upon submission. Errors must be corrected and a changed/corrected application must be submitted to Grants.gov on or before the application due date and time. If a Changed/Corrected application is submitted after the deadline, the application will be considered late. Applications that miss the due date and time are subjected to the NIH Policy on Late Application Submission.

Applicants are responsible for viewing their application before the due date in the eRA Commons to ensure accurate and successful submission.

Information on the submission process and a definition of on-time submission are provided in the <u>How to Apply - Application Guide</u> (<u>https://grants.nih.gov/grants/guide/url_redirect.php?id=82400</u>).

5. Intergovernmental Review (E.O. 12372)

This initiative is not subject to intergovernmental review (https://grants.nih.gov/grants/policy/nihgps/html5/section 10/10.10.1 executive orders.htm).

6. Funding Restrictions

All NIH awards are subject to the terms and conditions, cost principles, and other considerations described in the <u>NIH Grants Policy Statement</u> (<u>//grants.nih.gov/grants/guide/url_redirect.php?id=11120</u>)</u>. The <u>National Research Service Award (NRSA) policies</u> (<u>//grants.nih.gov/grants/guide/url_redirect.php?id=41171</u>)</u> apply to this program. An NRSA appointment may not be held concurrently with another Federally sponsored fellowship, traineeship, or similar Federal award that provides a stipend or otherwise duplicates provisions of the NRSA.

Pre-award costs are allowable only as described in the <u>NIH Grants Policy Statement Section 7.9.1 Selected Items of Cost</u> (//grants.nih.gov/grants/guide/url_redirect.php?id=11143). Note, however, that pre-award costs are not allowable charges for stipends or tuition/fees on institutional training grants because these costs may not be charged to the grant until a trainee has actually been appointed and the appropriate paperwork submitted to the NIH awarding component. Any additional costs associated with the decision to allow research elective credit for shortterm research training are not allowable charges on an institutional training grant.

7. Other Submission Requirements and Information

Applications must be submitted electronically following the instructions described in the <u>How to Apply - Application Guide</u> (<u>https://grants.nih.gov/grants/guide/url_redirect.php?id=82400</u>). Paper applications will not be accepted.

Applicants must complete all required registrations before the application due date. Section III. Eligibility Information contains information about registration.

For assistance with your electronic application or for more information on the electronic submission process, visit <u>How to Apply – Application Guide</u> (<u>https://grants.nih.gov/grants/how-to-apply-application-guide.html</u>). If you encounter a system issue beyond your control that threatens your ability to complete the submission process on-time, you must follow the <u>Dealing with System Issues (https://grants.nih.gov/grants/how-to-apply-application-guide.html</u>) guidance. For assistance with application submission, contact the Application Submission Contacts in Section VII.

Important reminders:

All PD(s)/PI(s) must include their eRA Commons ID in the Credential field of the Senior/Key Person Profile form. Failure to register in the Commons and to include a valid PD/PI Commons ID in the credential field will prevent the successful submission of an electronic application to NIH.

The applicant organization must ensure that the unique entity identifier provided on the application is the same identifier used in the organization's profile in the eRA Commons and for the System for Award Management. Additional information may be found in the <u>How to Apply - Application Guide</u> (<u>https://grants.nih.gov/grants/guide/url_redirect.php?id=82400</u>).

See more tips (//grants.nih.gov/grants/guide/url_redirect.php?id=11146) for avoiding common errors.

Upon receipt, applications will be evaluated for completeness and compliance with application instructions by the Center for Scientific Review and responsiveness by components of participating organizations, NIH. Applications that are incomplete, non-compliant and/or nonresponsive will not be reviewed.

Upon receipt, applications will be evaluated for completeness and compliance with application instructions by the Center for Scientific Review, NIH. Applications that are incomplete or non-compliant will not be reviewed.

Requests of \$500,000 or more for direct costs in any year

Applicants requesting \$500,000 or more in direct costs in any year (excluding consortium F&A) must contact a Scientific/ Research Contact at least 6 weeks before submitting the application and follow the Policy on the Acceptance for Review of Unsolicited Applications that Request \$500,000 or More in Direct Costs as described in the <u>How to Apply - Application Guide (https://grants.nih.gov/grants/guide/url_redirect.php?id=82400</u>). Applicants are advised to refer to the <u>Table of IC-Specific Information, Requirements and Staff Contacts (https://grants.nih.gov/guide/contacts/PA-25-168.html</u>) for exceptions.

Mandatory Disclosure

Recipients or subrecipients must submit any information related to violations of federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the federal award. See Mandatory Disclosures, <u>2 CFR 200.113 (https://www.ecfr.gov/current/title-2/subtitle-A/chapter-II/part-200/subpart-B/section-200.113</u>) and <u>NIH Grants Policy Statement Section 4.1.35</u> (https://grants.nih.gov/grants/policy/nihgps/html5/section 4/4.1.35 mandatory disclosures.htm).

Send written disclosures to the NIH Chief Grants Management Officer listed on the Notice of Award for the IC that funded the award and to the <u>HHS</u> Office of Inspector Grant Self Disclosure Program (https://oig.hhs.gov/compliance/self-disclosure-info/hhs-oig-grant-self-disclosure-program/) at grantdisclosures@oig.hhs.gov (mailto:grantdisclosures@oig.hhs.gov)

Post Submission Materials

Applicants are required to follow the instructions for post-submission materials, as described in <u>the policy</u> (//grants.nih.gov/grants/guide/url_redirect.php?id=82299).

Section V. Application Review Information

1. Criteria

Only the review criteria described below will be considered in the review process.

Applications submitted to the NIH in support of the <u>NIH mission (//grants.nih.gov/grants/guide/url_redirect.php?id=11149</u>) are evaluated for scientific and technical merit through the NIH peer review system. While any information in the application relevant to the program goals can be included as part of the review process, the race, ethnicity, or sex (including gender identity, sexual orientation, or transgender status) of trainee candidates, trainees, or faculty may not, in and of themselves, be used as factors in the evaluation of applications.

For this particular NOFO, note the following: Reviewers should evaluate the program's potential to:

- Produce a pool of trainees with the technical, operational, and professional skills necessary to conduct rigorous and reproducible research, and transition into careers in the biomedical research workforce. Reviewers should note that careers in the biomedical research workforce refers to the breadth of careers that sustain the biomedical research enterprise (which includes, but is not exclusive to, careers as independent NIHfunded investigators).
- Enable research-oriented individuals from a wide range of backgrounds, including individuals from underrepresented groups, the ability to participate and succeed in the research training program (for example, through recruitment and mentor training activities).

Overall Impact

Reviewers will provide an overall impact score to reflect their assessment of the likelihood that the proposed training program will equip the trainees with the skills, knowledge and experiences necessary to transition to successful careers in the biomedical research workforce, in consideration of the following review criteria and additional review criteria (as applicable for the project proposed.)

Scored Review Criteria

Reviewers will consider each of the review criteria below in the determination of the merit of the training program and give a separate score for each. When applicable, the reviewers will consider relevant questions in the context of proposed short-term training. An application does not need to be strong in all categories to be judged likely to have major biomedical research training impact.

Training Program and Environment

- Does the application provide a compelling rationale for the proposed research training program and propose appropriate training goals and objectives relevant to the rationale?
- Will the courses, structured training activities, mentoring, and research experiences achieve the training program's goals and objectives, and provide opportunities for trainees to acquire skill and expertise in transparent, rigorous, reproducible and relevant research methodologies and tools applicable to the goals of the training program?
- Is there an effective mechanism to monitor mentoring and to promote the development, retention and success of all trainees throughout their training?
- Will the proposed training program provide the trainees appropriate information regarding the breadth of careers in the biomedical research workforce for which their training may be useful, and appropriate learning opportunities that allow them to develop the professional skills and networks necessary to transition into those careers?
- Does the research training environment have adequate and appropriate facilities to support the proposed research training program?
- Is the level of institutional commitment to the training program, including administrative and research training support, sufficient to promote

the success of the program?

• Is it clear how the proposed training program is distinguished from other externally funded training programs at the institution?

Training Program Director(s)/Principal Investigator(s) (PD(s)/PI(s))

- Do the PD(s)/Pl(s) have the appropriate background, expertise, and administrative and training experience to provide strong leadership, direction, management, and administration of the proposed research training program?
- Do the PD(s)/PI(s) plan to commit sufficient effort to promote the program's success?
- Have the PD(s)/PI(s) demonstrated a strong commitment to training future researchers?
- Does the application describe how the PD(s)/PI(s) will receive appropriate training on effective mentoring practices to promote trainee success?
- For applications designating multiple PDs/PIs:
 - Is a strong justification provided that the multiple PD/PI leadership approach will benefit the training program and the trainees?
 - Is a strong and compelling leadership approach evident, including the designated roles and responsibilities, governance, and
 organizational structure consistent with and justified by the aims of the training program and the complementary expertise of the
 PDs/PIs?

Preceptors/Mentors

- Does the proposed program demonstrate the presence of a sufficient pool of preceptors/mentors with appropriate expertise and adequate resources available to support the training goals and objectives proposed in the application (including short-term training, if applicable)?
- Is there a strong plan to ensure participating faculty receive appropriate training in the use of evidence-informed mentoring practices that promote the development of trainees from all backgrounds, including trainees from groups underrepresented in the biomedical sciences?
- Do participating faculty appropriately promote the trainees' career progression?

Trainees

- Does the proposed program demonstrate the presence of a sufficient pool of potential trainees in appropriate disciplines and training stages to achieve the training program's objectives (including short-term training, if applicable)? Do the recruitment strategies identify trainee candidates with the potential to strongly benefit from, and with proper training and support, succeed in the training program?
- Does the program propose an appropriate multifactorial candidate review process to allow a broad group of research-oriented trainees the ability to participate in the training program (for example, a process that considers, consistent with applicable law, metrics beyond previous institution, GPA, and standardized test scores)?
- Are there well-defined and justified selection and re-appointment criteria?

Training Record

- How successful are the trainees (or, for new applications, recent graduates in similar training) in completing the program?
- Does the application provide evidence that trainees (or, for new applications, other recent graduates in similar training) conducted rigorous research that, appropriate to the training stage of the proposed program, advanced scientific knowledge and/or technologies with increasing self-direction (such as peer-reviewed publications and other accomplishments appropriate to the field)?
- How successful are the trainees (or, for new applications, recent graduates in similar training) in transitioning to careers in the biomedical research workforce that utilize their training and directly benefit the broader biomedical research enterprise?
- If disparities are observed in outcomes for trainees (or, for new applications, recent graduates in similar training), has the program proposed adequate approaches to identify the causes and, where warranted, approaches to feasibly address them?
- Does the program propose a rigorous evaluation plan to assess the effectiveness of the training program and the extent to which it is meeting its overall goals and objectives? Are effective mechanisms in place for obtaining feedback from current and former trainees, and appropriate plans to respond to trainee feedback?
- For applications that request short-term research training positions, is there a record of retaining health professional trainees in research training or other research activities for at least two years?

Additional Review Criteria

As applicable for the project proposed, reviewers will evaluate the following additional items while determining scientific and technical merit, and in providing an overall impact score, but will not give separate scores for these items.

Protections for Human Subjects

Generally not applicable. Reviewers should bring any concerns to the attention of the Scientific Review Officer.

Inclusion of Women, Minorities, and Individuals Across the Lifespan

Generally not applicable. Reviewers should bring any concerns to the attention of the Scientific Review Officer.

Vertebrate Animals

Generally not applicable. Reviewers should bring any concerns to the attention of the Scientific Review Officer.

Biohazards

Generally not applicable. Reviewers should bring any concerns to the attention of the Scientific Review Officer.

Recruitment Plan to Enhance Diversity

Reviewers will examine the strategies to be used in the recruitment of prospective candidates from underrepresented groups.

For purposes of this review, "recruitment" refers to outreach efforts intended to encourage individuals to apply for the program. "Recruitment" does not mean the appointment or hiring of an individual into the program. For renewals, the committee may consider the program's account of past experiences, including successful and unsuccessful strategies, but may not use the race, ethnicity, or sex of program trainees appointed during the previous funding period as factors in the evaluation.

Training in the Responsible Conduct of Research

All applications for support under this NOFO must include a plan to fulfill NIH requirements for instruction in the Responsible Conduct of Research (RCR). Taking into account the specific characteristics of the training program, the level of trainee experience, and the particular circumstances of the trainees, the reviewers will evaluate the adequacy of the proposed RCR training in relation to the following five required components: 1) *Format* - Does the plan satisfactorily address the format of instruction, e.g., lectures, coursework and/or real-time discussion groups, including face-to-face interaction? (*A plan involving only on-line instruction is not acceptable.*); 2) *Subject Matter* – Does the plan include a sufficiently broad selection of subject matter, such as conflict of interest, authorship, data management, human subjects and animal use, laboratory safety, research misconduct, research ethics? 3) *Faculty Participation* - Does the plan adequately describe how faculty will participate in the instruction? For renewal applications, are all training faculty who served as course directors, speakers, lecturers, and/or discussion leaders during the past project period named in the application? 4) *Duration of Instruction* - Does the plan meet the minimum requirements for RCR, i.e., at least eight contact hours of instruction? 5) *Frequency of Instruction* – Does the plan meet the minimum requirements for RCR, i.e., at least once during each career stage (undergraduate, post-baccalaureate, predoctoral, postdoctoral, and faculty levels) and at a frequency of no less than once every four years?

For renewal applications, does the progress report document acceptable RCR instruction in the five components described above? Does the plan describe how participation in RCR instruction is being monitored? Are appropriate changes in the plan for RCR instruction proposed in response to feedback and in response to evolving issues related to responsible conduct of research?

Training in Methods for Enhancing Reproducibility

Does the plan for Instruction in Methods for Enhancing Reproducibility describe how the program will provide training in scientific reasoning, rigorous research design, relevant experimental methods, consideration of relevant biological variables such as sex, authentication of key biological and/or chemical resources, quantitative approaches, and data analysis and interpretation, appropriate to field of study and the level and prior preparation of the trainees?

For renewal applications, does the application document appropriate changes in the plan for Methods for Enhancing Reproducibility in response to feedback and to evolving issues related to the conduct of rigorous and reproducible research?

Resubmissions

For Resubmissions, the committee will evaluate the application as now presented, taking into consideration the responses to comments from the previous scientific review group and changes made to the project.

Renewals

For Renewals, the committee will consider the progress made in the last funding period.

- Does the application describe the program's accomplishments over the past funding period(s)? Is the program achieving its training objectives?
- To what extent have the training goals and objectives been achieved since the last cycle? If certain goals were not met, did the program provide reasonable explanations and describe appropriate alternative approaches taken?
- Has the program evaluated the quality and effectiveness of the training experience (and when applicable, short-term training experience), and is there evidence that the evaluation outcomes and feedback from trainees have been acted upon?
- Are appropriate changes proposed that are likely to improve or strengthen the research training experience during the next project period (may not be applicable to short-term training)?
- Does the program use current, evidence-informed training and mentoring approaches and continue to evolve and reflect changes in the research area in which the training occurs?

Revisions

For Revisions, the committee will consider the appropriateness of the proposed expansion of the scope of the project. If the Revision application

relates to a specific aspect of the original application that was not recommended for approval by the committee, then the committee will consider whether the responses to comments from the previous scientific review group are adequate and whether substantial changes are clearly evident.

Additional Review Considerations

As applicable for the project proposed, reviewers will consider each of the following items, but will not give scores for these items, and should not consider them in providing an overall impact score.

Select Agent Research

Reviewers will assess the information provided in this section of the application, including (1) the Select Agent(s) to be used in the proposed research, (2) the registration status of all entities where Select Agent(s) will be used, (3) the procedures that will be used to monitor possession use and transfer of Select Agent(s), and (4) plans for appropriate biosafety, biocontainment, and security of the Select Agent(s).

Budget and Period of Support

Reviewers will consider whether the budget and the requested period of support are fully justified and reasonable in relation to the proposed research.

2. Review and Selection Process

Applications will be evaluated for scientific and technical merit by (an) appropriate Scientific Review Group(s), convened by the sponsoring Institute or Center in accordance with <u>NIH peer review policy and procedures (//grants.nih.gov/grants/guide/url_redirect.php?id=11154)</u>, using the stated review criteria. Assignment to a Scientific Review Group will be shown in the eRA Commons.

As part of the scientific peer review, all applications will receive a written critique.

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.

Applications will be assigned on the basis of established PHS referral guidelines to the appropriate NIH Institute or Center. Applications will compete for available funds with all other recommended applications. Following initial peer review, recommended applications will receive a second level of review by the appropriate national Advisory Council or Board.

The following will be considered in making funding decisions, consistent with applicable law:

- Scientific and technical merit of the proposed project as determined by scientific peer review.
- · Availability of funds.
- · Relevance of the proposed project to program priorities.

If the application is under consideration for funding, NIH will request "just-in-time" information from the applicant as described in the <u>NIH Grants</u> <u>Policy Statement Section 2.5.1. Just-in-Time Procedures. (//grants.nih.gov/grants/guide/url_redirect.php?id=82418</u>) This request is not a Notice of Award nor should it be construed to be an indicator of possible funding.

Prior to making an award, NIH reviews an applicant's federal award history in SAM.gov to ensure sound business practices. An applicant can review and comment on any information in the Responsibility/Qualification records available in SAM.gov. NIH will consider any comments by the applicant in the Responsibility/Qualification records in SAM.gov to ascertain the applicant's integrity, business ethics, and performance record of managing Federal awards per 2 CFR Part 200.206 "Federal awarding agency review of risk posed by applicants." This provision will apply to all NIH grants and cooperative agreements except fellowships.

3. Anticipated Announcement and Award Dates

After the peer review of the application is completed, the PD/PI will be able to access their Summary Statement (written critique) via the <u>eRA</u> <u>Commons (https://grants.nih.gov/grants/guide/url_redirect.php?id=11123)</u>. Refer to Part 1 for dates for peer review, advisory council review, and earliest start date.

Information regarding the disposition of applications is available in the <u>NIH Grants Policy Statement (//grants.nih.gov/grants/guide/url_redirect.php?</u> id=11120).

Section VI. Award Administration Information

1. Award Notices

A Notice of Award (NoA) is the official authorizing document notifying the applicant that an award has been made and that funds may be requested from the designated HHS payment system or office. The NoA is signed by the Grants Management Officer and emailed to the recipient's business official.

In accepting the award, the recipient agrees that any activities under the award are subject to all provisions currently in effect or implemented during the period of the award, other Department regulations and policies in effect at the time of the award, and applicable statutory provisions.

Recipients must comply with any funding restrictions described in <u>Section IV.6. Funding Restrictions</u>. Any pre-award costs incurred before receipt of the NoA are at the applicant's own risk. For more information on the Notice of Award, please refer to the <u>NIH Grants Policy Statement Section 5. The</u> <u>Notice of Award (https://grants.nih.gov/grants/policy/nihgps/HTML5/section 5/5 the notice of award.htm</u>) and NIH Grants & Funding website, see <u>Award Process. (https://grants.nih.gov/grants/pre-award-process.htm#award)</u>

2. Administrative and National Policy Requirements

The following Federal wide and HHS-specific policy requirements apply to awards funded through NIH:

- The rules listed at <u>2 CFR Part 200 (https://www.ecfr.gov/current/title-2/subtitle-A/chapter-II/part-200</u>), Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards.
- All NIH grant and cooperative agreement awards include the <u>NIH Grants Policy Statement (//grants.nih.gov/grants/guide/url_redirect.php?</u> <u>id=11120</u>) as part of the terms and conditions in the Notice of Award (NoA). The NoA includes the requirements of this NOFO. For these terms of award, see the <u>NIH Grants Policy Statement Part II: Terms and Conditions of NIH Grant Awards, Subpart A: General</u> (//grants.nih.gov/grants/guide/url_redirect.php?id=11120) and <u>Part II: Terms and Conditions of NIH Grant Awards, Subpart B: Terms and Conditions for Specific Types of Grants, Recipients, and Activities (//grants.nih.gov/grants/guide/url_redirect.php?id=11159).
 </u>
- If a recipient receives an award, the recipient must follow all applicable nondiscrimination laws. The recipient agrees to this when registering in SAM.gov. The recipient must also submit an Assurance of Compliance (<u>HHS-690 (https://www.hhs.gov/sites/default/files/form-hhs690.pdf</u>)). To learn more, see the <u>Laws and Regulations Enforced by the HHS Office for Civil Rights website (https://www.hhs.gov/civil-rights/forproviders/laws-regulations-guidance/laws/index.html).
 </u>
 - HHS recognizes that NIH research projects are often limited in scope for many reasons that are nondiscriminatory, such as the principal investigator's scientific interest, funding limitations, recruitment requirements, and other considerations. Thus, criteria in research protocols that target or exclude certain populations are warranted where nondiscriminatory justifications establish that such criteria are appropriate with respect to the health or safety of the subjects, the scientific study design, or the purpose of the research. For additional guidance regarding how the provisions apply to NIH grant programs, please contact the Scientific/Research Contact that is identified in Section VII under Agency Contacts of this NOFO.

All federal statutes and regulations relevant to federal financial assistance, including those highlighted in <u>NIH Grants Policy Statement Section 4 Public</u> <u>Policy Requirements, Objectives and Other Appropriation Mandates.</u>

(https://grants.nih.gov/grants/policy/nihgps/HTML5/section 4/4 public policy requirements objectives and other appropriation mandates.htm)

Recipients are responsible for ensuring that their activities comply with all applicable federal regulations. NIH may terminate awards under certain circumstances. See <u>2 CFR Part 200.340 Termination (https://www.ecfr.gov/current/title-2/subtitle-A/chapter-II/part-200/subpart-D/subject-group-ECFR86b76dde0e1e9dc/section-200.340</u>) and <u>NIH Grants Policy Statement Section 8.5.2 Remedies for Noncompliance or Enforcement Actions:</u> Suspension, Termination, and Withholding of Support

(https://grants.nih.gov/grants/policy/nihgps/html5/section 8/8.5.2 remedies for noncompliance or enforcement actionssuspension termination and withholding of support.htm).

Institutional NRSA training grants must be administered in accordance with the current NRSA section of the <u>NIH Grants Policy Statement -</u> Institutional Research Training Grants (//grants.nih.gov/grants/guide/url_redirect.php?id=61170).

The taxability of stipends is described in the <u>NIH Grants Policy Statement (//grants.nih.gov/grants/guide/url_redirect.php?id=41171</u>). Policies regarding the Ruth L. Kirschstein-NRSA payback obligation are explained in the <u>NIH Grants Policy Statement</u> (//grants.nih.gov/grants/guide/url_redirect.php?id=41171).

As specified in the NIH Revitalization Act of 1993, Kirschstein-NRSA recipients incur a service payback obligation for the first 12 months of postdoctoral support. Policies regarding the Ruth L. Kirschstein-NRSA payback obligation are explained in the <u>NIH Grants Policy Statement</u> (//grants.nih.gov/grants/guide/url_redirect.php?id=41171); and more details are in the <u>Frequently Asked Questions</u>

(//grants.nih.gov/grants/guide/url_redirect.php?id=61174). Officials at the recipient institution have the responsibility of explaining the terms of the payback requirements to all prospective trainees before appointment to the training grant. Additionally, all trainees recruited into the training program should be provided with information related to the career options that might be available when they complete the program. The suitability of such career options as methods to satisfy the NRSA service payback obligation should be discussed.

Successful recipients under this NOFO agree that:

Where the award funding involves implementing, acquiring, or upgrading health IT for activities by any funded entity, recipients and subrecipient(s) are required to: Use health IT that meets standards and implementation specifications adopted in 45 CFR part 170, Subpart B, if such standards and implementation specifications can support the activity. Visit <u>https://www.ecfr.gov/current/title-45/subtitle-A/subchapter-D/part-170/subpart-B</u> (<u>https://www.ecfr.gov/current/title-45/subtitle-A/subchapter-D/part-170/subpart-B</u>) to learn more.

Where the award funding involves implementing, acquiring, or upgrading health IT for activities by eligible clinicians in ambulatory settings, or hospitals, eligible under Sections 4101, 4102, and 4201 of the HITECH Act, use health IT certified under the ONC Health IT Certification Program if certified technology can support the activity. Visit <u>https://www.healthit.gov/topic/certification-health-it</u> (<u>https://www.healthit.gov/topic/certification-health-it</u>) to learn more.

Pursuant to the Cybersecurity Act of 2015, Div. N, § 405, Pub. Law 114-113, 6 USC § 1533(d), the HHS Secretary has established a common set of voluntary, consensus-based, and industry-led guidelines, best practices, methodologies, procedures, and processes.

Successful recipients under this NOFO agree that:

When recipients, subrecipients, or third-party entities have:

- 1. ongoing and consistent access to HHS owned or operated information or operational technology systems; and
- 2. receive, maintain, transmit, store, access, exchange, process, or utilize personal identifiable information (PII) or personal health information (PHI) obtained from the awarding HHS agency for the purposes of executing the award.

Recipients shall develop plans and procedures, modeled after the <u>NIST Cybersecurity framework (https://www.nist.gov/cyberframework)</u>, to protect HHS systems and data. Please refer to <u>NIH Post-Award Monitoring and Reporting (https://grants.nih.gov/grants/post-award-monitoring-and-reporting.htm</u>) for additional information.

Inventions and Copyrights

Awards made primarily for educational purposes are exempted from the PHS invention requirements and thus invention reporting is not required, as described in the <u>NIH Grants Policy Statement (//grants.nih.gov/grants/guide/url_redirect.php?id=61131</u>).

Cooperative Agreement Terms and Conditions of Award

Not Applicable

3. Data Management and Sharing

Consistent with the 2023 NIH Policy for Data Management and Sharing, when data management and sharing is applicable to the award, recipients will be required to adhere to the Data Management and Sharing requirements as outlined in the <u>NIH Grants Policy Statement</u>. (<u>https://grants.nih.gov/grants/policy/nihgps/HTML5/section_8/8.2.3_sharing_research_resources.htm#Data</u>)

4. Reporting

When multiple years are involved, recipients will be required to submit the <u>Research Performance Progress Report (RPPR)</u> (//grants.nih.gov/grants/rppr/index.htm) annually. Continuation support will not be provided until the required forms are submitted and accepted.

Failure by the recipient institution to submit required forms in a timely, complete, and accurate manner may result in an expenditure disallowance or a delay in any continuation funding for the award. The Federal Funding Accountability and Transparency Act of 2006 as amended (FFATA), includes a requirement for recipients of Federal grants to report information about first-tier subawards and executive compensation under Federal assistance awards issued in FY2011 or later. All recipients of applicable NIH grants and cooperative agreements are required to report to the Federal Subaward Reporting System (FSRS) available at www.fsrs.gov///grants.nih.gov/grants.guide/url redirect.php?id=11170) on all subawards over \$25,000. See the NIH Grants Policy Statement (//grants.nih.gov/grants/guide/url redirect.php?id=82420) for additional information on this reporting requirement.

Other Reporting Requirements

The institution must submit a completed Statement of Appointment (<u>PHS Form 2271 (//grants.nih.gov/grants/guide/url_redirect.php?id=61189</u>)) for each trainee appointed or reappointed to the training grant for 8 weeks or more. Recipients must submit the PHS 2271 data electronically using the xTrain system. More information on xTrain is available at <u>xTrain (eRA Commons) (//grants.nih.gov/grants/guide/url_redirect.php?id=41183</u>). An appointment or reappointment may begin any time during the budget period, but not before the budget period start date of the grant year.

A final RPPR, the expenditure data portion of the Federal Financial Report, and Termination Notices for all Trainees, are required for closeout of an award as described in the <u>NIH Grants Policy Statement Section 8.6 Closeout</u>

(https://grants.nih.gov/grants/policy/nihgps/HTML5/section 8/8.6_closeout.htm). NIH NOFOs outline intended research goals and objectives. Post award, NIH will review and measure performance based on the details and outcomes that are shared within the RPPR, as described at 2 CFR Part 200.301.

In accordance with the regulatory requirements provided at 45 CFR 75.113 and 2 CFR Part 200.113 and Appendix XII to 45 CFR Part 75 and 2 CFR Part 200, recipients that have currently active Federal grants, cooperative agreements, and procurement contracts from all Federal awarding agencies with a cumulative total value greater than \$10,000,000 for any period of time during the period of performance of a Federal award, must report and maintain the currency of information reported in the System for Award Management (SAM) about civil, criminal, and administrative proceedings in connection with the award or performance of a Federal award that reached final disposition within the most recent five-year period. The recipient must also make semiannual disclosures regarding such proceedings. Proceedings information will be made publicly available in the designated integrity and performance system (currently FAPIIS). This is a statutory requirement under section 872 of Public Law 110-417, as amended (41 U.S.C. 2313). As required by section 3010 of Public Law 111-212, all information posted in the designated integrity and performance system on or after April 15, 2011, except past performance reviews required for Federal procurement contracts, will be publicly available. Full reporting requirements and procedures are found in Appendix XII to 45 CFR Part 75 and 2 CFR Part 200 Award Term and Condition for Recipient Integrity and Performance Matters.

5. Evaluation

In carrying out its stewardship of human resource-related programs, NIH may request information essential to an assessment of the effectiveness of

this program from databases and from participants themselves. Participants may be contacted after the completion of this award for periodic updates on various aspects of their employment history, publications, support from research grants or contracts, honors and awards, professional activities, and other information helpful in evaluating the impact of the program.

Section VII. Agency Contacts

We encourage inquiries concerning this funding opportunity and welcome the opportunity to answer questions from potential applicants.

Because of the difference in individual Institute and Center (IC) program requirements for this NOFO, prospective applications **MUST** consult the **Table** of IC-Specific Information, Requirements, and Staff Contacts, to make sure that their application is responsive to the requirements of one of the participating NIH ICs. Prior consultation with NIH staff is strongly encouraged.

Application Submission Contacts

eRA Service Desk (Questions regarding ASSIST, eRA Commons, application errors and warnings, documenting system problems that threaten ontime submission, and post-submission issues)

Finding Help Online: <u>https://www.era.nih.gov/need-help (https://www.era.nih.gov/need-help)</u> (preferred method of contact) Telephone: 301-402-7469 or 866-504-9552 (Toll Free)

General Grants Information (Questions regarding application processes and NIH grant resources) Email: <u>GrantsInfo@nih.gov (mailto:GrantsInfo@nih.gov</u>) (preferred method of contact) Telephone: 301-480-7075

Grants.gov Customer Support (Questions regarding Grants.gov registration and Workspace) Contact Center Telephone: 800-518-4726 Email: support@grants.gov (mailto:support@grants.gov)

Scientific/Research Contacts

See Table of IC-Specific Information, Requirements and Staff Contacts (https://grants.nih.gov/guide/contacts/PA-25-168.html)

Peer Review Contact(s)

Examine your eRA Commons account for review assignment and contact information (information appears two weeks after the submission due date).

Financial/Grants Management Contacts

See Table of IC-Specific Information, Requirements and Staff Contacts (https://grants.nih.gov/guide/contacts/PA-25-168.html)

Section VIII. Other Information

Recently issued trans-NIH policy notices (//grants.nih.gov/grants/guide/url_redirect.php?id=11163) may affect your application submission. A full list of policy notices published by NIH is provided in the <u>NIH Guide for Grants and Contracts</u> (//grants.nih.gov/grants/guide/url_redirect.php?id=11164). All awards are subject to the terms and conditions, cost principles, and other considerations described in the <u>NIH Grants Policy Statement</u> (//grants.nih.gov/grants/guide/url_redirect.php?id=11120).

Authority and Regulations

Awards are made under the authorization of Sections 301 and 405 of the Public Health Service Act as amended (42 USC 241 and 284) and under Federal Regulations 42 CFR 63A and 2 CFR Part 200.

Weekly TOC for this Announcement (/grants/guide/WeeklyIndex.cfm?11-15-24) NIH Funding Opportunities and Notices (/grants/guide/index.html)



National Institutes of Health

Office of Extramural Research

(/grants/oer.htm)

(https://www.hhs.gov/)

Department of Health and Human Services (HHS)

NIH... Turning Discovery Into Health®



EXHIBIT C

4/11/25, 3:15 PM Case 1 PA52531661 Ruthol7 Harden National Research Researc

March 31, 2025

This funding opportunity was updated to align with agency priorities. Carefully reread the full funding opportunity and make any needed adjustments to your application prior to submission.

Department of Health and Human Services

Part 1. Overview Information

Participating Organization(s)

National Institutes of Health (NIH (http://www.nih.gov))

Components of Participating Organizations

Office of The Director, National Institutes of Health (OD (https://www.nih.gov/institutes-nih/nih-office-director))

National Eye Institute (NEI (https://www.nei.nih.gov/))

National Heart, Lung, and Blood Institute (NHLBI (https://www.nhlbi.nih.gov/))

National Human Genome Research Institute (NHGRI (https://www.genome.gov/))

National Institute on Aging (NIA (https://www.nia.nih.gov/))

National Institute on Alcohol Abuse and Alcoholism (NIAAA (https://www.niaaa.nih.gov/))

National Institute of Allergy and Infectious Diseases (NIAID (https://www.niaid.nih.gov/))

National Institute of Arthritis and Musculoskeletal and Skin Diseases (NIAMS (https://www.niams.nih.gov/))

National Institute of Biomedical Imaging and Bioengineering (NIBIB (https://www.nibib.nih.gov/))

Eunice Kennedy Shriver National Institute of Child Health and Human Development (NICHD (https://www.nichd.nih.gov/))

National Institute on Deafness and Other Communication Disorders (NIDCD (https://www.nidcd.nih.gov/))

National Institute on Drug Abuse (NIDA (https://www.drugabuse.gov/))

National Institute of Environmental Health Sciences (NIEHS (https://www.niehs.nih.gov/))

National Institute of General Medical Sciences (NIGMS (https://www.nigms.nih.gov/))

National Institute of Mental Health (NIMH (https://www.nimh.nih.gov/index.shtml))

National Institute of Nursing Research (NINR (https://www.ninr.nih.gov/))

National Center for Complementary and Integrative Health (NCCIH (https://nccih.nih.gov/))

Division of Program Coordination, Planning and Strategic Initiatives, Office of Research Infrastructure Programs (ORIP (https://orip.nih.gov/))

National Cancer Institute (NCI (https://www.cancer.gov/))

National Institute on Diabetes and Digestive and Kidney Diseases (<u>NIDDK (https://www.niddk.nih.gov/</u>)), November 22, 2024 - Participation added (<u>NOT-DK-25-007 (https://grants.nih.gov/grants/guide/notice-files/NOT-DK-25-007.html</u>))

All applications to this funding opportunity announcement should fall within the mission of the Institutes/Centers. The following NIH Offices may cofund applications assigned to those Institutes/Centers.

Office of Research on Women's Health (ORWH (https://orwh.od.nih.gov/))

Office of Data Science Strategy (ODSS (https://datascience.nih.gov/about/odss))

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Special Note: Not all NIH Institutes and Centers participate in Parent Announcements. Applicants should carefully note which ICs participate in this announcement and view their respective areas of research interest and requirements at the <u>Table of IC-Specific Information, Requirements and</u> <u>Staff Contacts (https://grants.nih.gov/guide/contacts/PA-25-168.html)</u> website. ICs that do not participate in this announcement will not consider applications for funding. Consultation with NIH staff before submitting an application is strongly encouraged.

Funding Opportunity Title

Ruth L. Kirschstein National Research Service Award (NRSA) Institutional Research Training Grant (Parent T32)

Activity Code

<u>T32 (//grants.nih.gov/grants/funding/ac_search_results.htm?text_curr=t32&Search.x=0&Search_y=0&Search_Type=Activity)</u> Institutional National Research Service Award (NRSA)

Announcement Type

Reissue of PA-23-048 (https://grants.nih.gov/grants/guide/pa-files/PA-23-048.html)

Related Notices

See <u>Notices of Special Interest (https://grants.nih.gov/grants/guide/NOSIs_targetingList.cfm?GuideDocID=41857</u>) associated with this funding opportunity

- March 31, 2025 This funding opportunity was updated to align with agency priorities. Carefully reread the full funding opportunity and make any needed adjustments to your application prior to submission.
- December 10, 2024 Notice of Correction to Eligibility Information and Application Instructions for the Ruth L. Kirschstein National Research Service Award (NRSA) Institutional Research Training Grant (Parent T32) (PA-25-168). See Notice <u>NOT-OD-25-036</u> (//grants.nih.gov/grants/guide/notice-files/NOT-OD-25-036.html).
- November 22, 2024 Notice of NIDDK Participation in PA-25-168: "Ruth L. Kirschstein National Research Service Award (NRSA) Institutional Research Training Grant (Parent T32)". See Notice <u>NOT-DK-25-007 (https://grants.nih.gov/grants/guide/notice-files/NOT-DK-25-007.html</u>).
- November 18, 2024 Notice of Informational Webinar for NIGMS-Supported Postdoctoral Clinician-Scientists Institutional Training Programs (T32). See Notice NOT-GM-25-005 (//grants.nih.gov/grants/guide/notice-files/NOT-GM-25-005.html).

Funding Opportunity Number (FON)

PA-25-168

Companion Funding Opportunity

None

Number of Applications

See Section III. 3. Additional Information on Eligibility.

Assistance Listing Number(s)

93.310, 93.313, 93.837, 93.233, 93.838, 93.839, 93.840, 93.286, 93.273, 93.213, 93.397, 93.396, 93.399, 93.398, 93.855, 93.351, 93.859, 93.361, 93.279, 93.113, 93.867, 93.172, 93.242, 93.866, 93.865, 93.846, 93.173, 93.847

Funding Opportunity Purpose

The National Institutes of Health (NIH) will award Ruth L. Kirschstein National Research Service Award (NRSA) Institutional Research Training Grants (T32) to eligible, domestic institutions to develop and/or enhance predoctoral and postdoctoral research training, including short-term research training, to help ensure that a highly trained workforce is available to meet the needs of the Nation's biomedical, behavioral, and clinical research agenda. Research training programs are expected to incorporate engaging, didactic, research, and career development elements to prepare trainees for careers that will have a significant impact on the health-related research needs of the Nation. Programs proposing only short-term predoctoral research training should not apply to this announcement, but rather to the Kirschstein-NRSA Short-Term Institutional Research Training Grant Program (T35) exclusively reserved for predoctoral, short-term research training.

This Notice of Funding Opportunity (NOFO) does not allow Trainees to lead an independent clinical trial, but does allow them to obtain research experience in a clinical trial led by a mentor or co-mentor.

Funding Opportunity Goal(s)

NIH's mission is to seek fundamental knowledge about the nature and behavior of living systems and the application of that knowledge to enhance health, lengthen life, and reduce illness and disability.

Key Dates

Posted Date

November 15, 2024

Open Date (Earliest Submission Date)

December 25, 2024

Letter of Intent Due Date(s)

Not Applicable

The following table includes NIH <u>standard due dates (https://grants.nih.gov/grants/how-to-apply-application-guide/due-dates-and-submission-policies/due-dates.htm</u>) marked with an asterisk.

Application Due Dates		Review and Award Cycles			
New	Renewal / Resubmission / Revision (as allowed)	AIDS - New/Renewal/Resubmission/Revision, as allowed	Scientific Merit Review	Advisory Council Review	Earliest Start Date
January 25, 2025 *	January 25, 2025 *	May 07, 2025 *	July 2025	October 2025	December 2025
May 25, 2025 *	May 25, 2025 *	September 07, 2025 *	November 2025	January 2026	April 2026
September 25, 2025 *	September 25, 2025 *	January 07, 2026 *	March 2026	May 2026	July 2026
January 25, 2026 *	January 25, 2026 *	May 07, 2026 *	July 2026	October 2026	December 2026
May 25, 2026 *	May 25, 2026 *	September 07, 2026 *	November 2026	January 2027	April 2027
September 25, 2026 *	September 25, 2026 *	January 07, 2027 *	March 2027	May 2027	July 2027
January 25, 2027 *	January 25, 2027 *	May 07, 2027 *	July 2027	October 2027	December 2027
May 25, 2027 *	May 25, 2027 *	September 07, 2027 *	November 2027	January 2028	April 2028
September 25, 2027 *	September 25, 2027 *	January 07, 2028 *	March 2028	May 2028	July 2028

All applications are due by 5:00 PM local time of applicant organization.

Applicants are encouraged to apply early to allow adequate time to make any corrections to errors found in the application during the submission process by the due date.

Expiration Date

May 05, 2028

Due Dates for E.O. 12372

Not Applicable

Required Application Instructions

It is critical that applicants follow the Training (T) Instructions in the How to Apply Application Guide, (//grants.nih.gov/grants/guide/url_redirect.php? id=82400) except where instructed to do otherwise (in this NOFO or in a Notice from the <u>NIH Guide for Grants and Contracts</u> (//grants.nih.gov/grants/guide/url_redirect.php?id=11164)). Conformance to all requirements (both in the How to Apply Application Guide, (//grants.nih.gov/grants/guide/url_redirect.php?id=82400) and the NOFO) is required and strictly enforced. Applicants must read and follow all application instructions in the How to Apply Application Guide, (//grants.nih.gov/grants/guide/url_redirect.php?id=82400) as well as any programspecific instructions noted in Section IV. When the program-specific instructions deviate from those in the How to Apply Application Guide, (//grants.nih.gov/grants/guide/url_redirect.php?id=82400), follow the program-specific instructions. **Applications that do not comply with these instructions may be delayed or not accepted for review.**

There are several options available to submit your application through Grants.gov to NIH and Department of Health and Human Services partners. You **must** use one of these submission options to access the application forms for this opportunity.

1. Use the NIH ASSIST system to prepare, submit and track your application online.

Apply Online Using ASSIST

- Use an institutional system-to-system (S2S) solution to prepare and submit your application to Grants.gov and <u>eRA Commons</u> (<u>https://public.era.nih.gov/commons/</u>) to track your application. Check with your institutional officials regarding availability.
- Use <u>Grants.gov (https://grants.gov/search-grants?oppStatuses=closed|archived|posted|forecasted&fon=PA-25-168)</u> Workspace to prepare and submit your application and <u>eRA Commons (http://public.era.nih.gov/commons/)</u> to track your application.

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Part 2. Full Text of Announcement

Section I. Funding Opportunity Description

The overall goal of the NIH Ruth L. Kirschstein National Research Service Award (NRSA) program is to help ensure that a pool of highly trained scientists is available in appropriate scientific disciplines to address the Nation's biomedical, behavioral, and clinical research needs. In order to accomplish this goal, NRSA training programs are designed to train individuals to conduct research and to prepare for research careers. More information about NRSA programs may be found at the <u>Ruth L. Kirschstein National Research Service Award</u> (https://researchtraining.nih.gov/programs/training-grants/T32-a) (NRSA) website.

The NRSA program has been the primary means of supporting predoctoral and postdoctoral research training programs since enactment of the NRSA legislation in 1974. Institutional NRSA programs allow the Training Program Director/Principal Investigator (Training PD/PI) to select trainees and

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develop an enhanced program of coursework, mentored research experiences, and technical, operational and professional skills development that provides added value to already existing programs and prepares the appointed trainees for careers in the biomedical research workforce (the breadth of careers that sustain the biomedical research enterprise, including but limited to careers as independent NIH-funded investigators).

The grant offsets the costs of stipends, tuition and fees, and training related experiences, including health insurance, for the appointed trainees in accordance with the approved NIH support levels. The proposed institutional research training program may complement other ongoing research training and career development programs at the applicant organization but must be clearly distinct from related program currently receiving Federal support.

Purpose

The purpose of the Ruth L. Kirschstein National Research Service Award (NRSA) Institutional Research Training Grant (T32) program is to develop and/or enhance research training opportunities for individuals interested in careers in biomedical, behavioral or social sciences, and clinical research, in health services research, or in any other discipline relevant to the NIH mission. NIH encourages biomedical research training to keep pace with the rapid evolution of the biomedical research enterprise that is increasingly complex, interdisciplinary, quantitative, and collaborative. Programs should prepare trainees to effectively engage in a research enterprise characterized by increased breadth in the approaches taken to investigate research questions, and the range of careers that biomedical doctoral recipients are pursuing. There is also increasing recognition of the need to enhance the reproducibility of biomedical research results through scientific rigor and transparency, and the skills of mentors to effectively engage the 21st century trainee population.

Each proposed program should provide rigorous research training, and mentored research experiences, and are expected to help trainees develop:

- The skills to independently acquire the knowledge needed to advance their chosen field;
- The ability to think critically and independently, and to identify important research questions and approaches that push forward the boundaries of their areas of study;
- An understanding of the health-related sciences and the relationship of their research training to health and disease;
- A strong foundation in scientific reasoning, rigorous and reproducible research design, experimental methods, quantitative and computational approaches, and data analysis and interpretation;
- The skills to conduct research in the safest manner possible, and a commitment to approaching biomedical research responsibly, ethically, and with integrity;
- Experience initiating, conducting, interpreting and presenting rigorous and reproducible research with increasing self-direction;
- The ability to work effectively in teams with colleagues from a variety of scientific backgrounds and to promote the development of safe and supportive scientific research environments;
- The skills to teach and communicate scientific research methodologies and findings to a wide variety of audiences (e.g., discipline-specific, across disciplines, and the public); and
- The knowledge, professional skills, and experiences required to identify and transition into careers in the biomedical research workforce.

Program Considerations

This NOFO is intended to support rigorous research training programs that will promote the development of a biomedical research workforce that will benefit from the full range of skills and experiences needed to advance and translate discovery for the benefit of all. Consistent with existing NIH practices and applicable law: (1) Funded programs may not use the race, ethnicity, or sex of a trainee or faculty candidate as an eligibility or selection criteria, and (2) NIH does not use the race, ethnicity, or sex of trainee candidates, trainees, or faculty in the application review process or funding decisions. Applicants and award recipients are encouraged to consult with their General Counsel to ensure all applicable laws and regulations are being followed in program design and implementation.

Applicants are expected to identify unique training goals and objectives (i.e., specific and measurable outcomes the program intends to achieve) and develop plans to implement evidence-informed training and mentoring activities (i.e., approaches that are grounded in the literature and from evaluations of existing relevant training programs) to address those needs and objectives.

Safe and Supportive Research Training Environments that Promote Scientific Rigor

Funded programs are expected to implement robust plans to develop safe and supportive research training environments to maximize success for all individuals in the training program. Specifically, funded programs should have institutional and departmental environments where all individuals are integrated into and supported by the biomedical research community. Funded programs are also expected to implement plans to enhance trainee retention (i.e., to sustain the scientific interests and participation of trainees from all backgrounds), which may be integrated with plans for mentor training (see below). Safety in research training environments should encompass:

- Environments free from <u>harassment</u>, <u>bullying and intimidation (https://grants.nih.gov/grants/policy/harassment.htm)</u>, in which everyone participating is treated in a respectful and supportive manner,
- Laboratory and clinical settings where individuals exercise the highest standards of practice for chemical, biological and physical safety (for more information see examples of <u>Laboratory Safety Training Guidelines (https://nigms.nih.gov/training/Pages/Laboratory-Safety-Training-and-Guidelines.aspx</u>)), and
- Practices at the institutional leadership and research community levels that demonstrate core values and behaviors to emphasize safety over competing goals.

Biomedical research and the resulting scientific knowledge are increasingly complex, multidisciplinary, and collaborative in nature. Training PDs/PIs are encouraged to develop institutional training programs that will provide trainees with education and experience in a variety of rigorous and reproducible scientific approaches, systems for study, tools, and technologies. Consideration of team-based research approaches may also be

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warranted depending upon the goals of the proposed training program. Funded training programs must ensure that trainees have a solid foundation in methods to enhance data reproducibility through rigor and transparency (for examples, see <u>NIH Rigor and Reproducibility Training</u> (<u>https://www.nih.gov/research-training/rigor-reproducibility/training</u>)).

Mentor Training

Effective mentorship is critical to the development and retention of scientists and the advancement of research. Studies have shown that effective mentorship has overall positive effects on mentees, mentors and the overall research environment (e.g., improved academic achievement, retention, and degree attainment, career satisfaction, career commitment). Formal training, and ongoing professional development in effective mentoring practices has been shown to improve the knowledge and skills of research mentors across career stages.

Funded training programs are expected to support effective mentorship by ensuring all program faculty complete formal mentor training and periodic refreshers. Programs should consider the following as potential mentor training components, and are encouraged to adapt to program and trainee needs:

- · Aligning expectations.
- · Maintaining effective communication.
- Fostering independence.
- · Assessing understanding.
- · Enhancing professional development.
- · Articulating a mentoring philosophy and plan.

Trainee Career Development

Scientists supported by NRSA training programs pursue a variety of careers in the biomedical research workforce in various sectors. These include research-intensive careers in academia, industry and government, and research-related careers in academic institutions, government agencies, for-profit businesses, and private foundations that directly benefit the broader biomedical research enterprise. Training PDs/PIs should make available appropriate skills training so that trainees are prepared to apply for subsequent independent support for their training, career development or research program (e.g., an individual fellowship award, mentored career development award, or research project grant), as appropriate for their career stage and interest. Training programs should also make available structured career development opportunities (e.g., workshops, individual development plans, informational interviews, shadowing, internships) so that trainees will obtain a working knowledge of various potential career paths that would make strong use of the knowledge and skills gained during research training, and the steps, experiences, networks, and credentials required to transition successfully to the next stage of their chosen career.

Considerations for Clinicians and Dual-degree Students

Past studies have shown that health professional trainees who train in programs with postdoctoral researchers who have intensive research backgrounds are more likely to work with their institutions to apply for and receive subsequent research grant support. Programs that emphasize research training for individuals with the MD or other health-professional degrees are therefore encouraged to develop interactions with basic science departments and include trainees with research doctorates when this approach is consistent with the goals of the proposed training program.

Institutional research training grants must be used to support a program of full-time research training. Within the full-time training period, research trainees who are also training as clinicians must devote their time to the proposed research training and confine clinical duties to those that are an integral part of the research training experience or can be conducted in the allowable additional 25% of their time (e.g., 10 hours per week) that may be devoted to clinical employment. The program may not be used to support studies leading to the MD, DDS, or other clinical, health-professional degrees except when those studies are part of a formal combined research degree program, such as the MD/PhD. Similarly, trainees may not accept NRSA support for clinical training that is part of residency training leading to clinical certification in a medical or dental specialty or subspecialty. It is permissible and encouraged, however, for clinicians to engage in NRSA-supported, full-time postdoctoral research training even when that experience is creditable toward certification by a clinical specialty or subspecialty board.

Other Considerations

Institutional commitment and support for the proposed training program are important elements of the application. The research training program may complement and synergize with other ongoing federally supported research training and career development programs at the applicant institution (e.g., in the development of skills needed for careers in the biomedical research workforce that are not discipline-specific); however, the research training goals and objectives must be distinct from related programs at the same institution currently receiving federal support. Funded programs are expected to provide evidence of accomplishing the training goals in progress reports and upon renewal, to make aggregate data on training and career outcomes publicly available, and are strongly encouraged to disseminate successful training practices to the broader training community. Training grant funds may not be used solely as a vehicle to provide stipends for trainees to conduct research.

The duration of training, the transition of trainees to individual support mechanisms, and their transition to the next career stage are important considerations in institutional training programs. Also, an important consideration is the engagement of trainees in their training goals, process and activities through the program that enhances what they may be getting in existing programs within the institution. Training PD/PIs should limit appointments to individuals who plan to remain in the training program for no less than two years, whether that support comes from a training grant or some combination of NRSA and non-NRSA programs institution.

Short-term training is not intended, and may not be used, to support activities that would ordinarily be part of a research degree program, nor for any undergraduate-level training. Short-term positions should be requested at the time of application, as described in the <u>NIH Grants Policy Statement</u> (<u>https://grants.nih.gov/grants/policy/nihgps/HTML5/section_11/11.1_general.htm</u>). Research training programs solely for short-term research training

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should not apply to this announcement, but rather the T35 NRSA NOFO, which can be found in the NIH Training Kiosk.

(https://researchtraining.nih.gov/programs/training-grants)

This Notice of Funding Opportunity (NOFO) does not support of Trainees to lead an independent clinical trial, but does allow them to obtain research experience in a clinical trial led by a mentor or co-mentor. NIH strongly supports training towards a career in clinically relevant research and so gaining experience in clinical trials under the guidance of a mentor or co-mentor is encouraged.

Special Note: Because of the differences in individual Institute and Center (IC) program requirements for this NOFO, prospective applicants MUST consult the <u>Table of IC-Specific Information, Requirements and Staff Contacts (https://grants.nih.gov/guide/contacts/PA-25-168.html)</u>, to make sure that their application is appropriate for the requirements of one of the participating NIH ICs. Prior consultation with NIH staff is strongly encouraged.

See Section VIII. Other Information for award authorities and regulations.

Section II. Award Information

Funding Instrument

Grant: A financial assistance mechanism providing money, property, or both to an eligible entity to carry out an approved project or activity.

Application Types Allowed

New Renewal Resubmission Revision

The <u>OER Glossary (//grants.nih.gov/grants/guide/url_redirect.php?id=11116)</u> and the <u>How to Apply Application Guide,</u> (//grants.nih.gov/grants/guide/url_redirect.php?id=82400) provide details on these application types. Only those application types listed here are allowed for this NOFO.

Clinical Trial?

Not Allowed: Only accepting applications that do not propose clinical trials.

Note: Appointed Trainees are permitted to obtain research experience in a clinical trial led by a mentor or co-mentor.

Need help determining whether you are doing a clinical trial? (https://grants.nih.gov/grants/guide/url_redirect.php?id=82370)

Funds Available and Anticipated Number of Awards

The number of awards is contingent upon NIH appropriations and the submission of a sufficient number of meritorious applications.

Award Budget

Application budgets are not limited, but need to reflect the actual needs of the proposed project.

Recipients are expected to be familiar with and comply with applicable cost policies and the NRSA Guidelines (<u>*NIH Grants Policy Statement*</u> - <u>Institutional Research Training Grants (//grants.nih.gov/grants/guide/url_redirect.php?id=41126)</u></u>). Funds may be used only for those expenses that are directly related to and necessary for the research training and must be expended in conformance with OMB Cost Principles, the <u>*NIH Grants*</u> <u>*Policy Statement* (//grants.nih.gov/grants/guide/url_redirect.php?id=11120</u>), and the NRSA regulations, policies, guidelines, and conditions set forth in this document.

Award Project Period

Awards for T32 institutional NRSA research training grants may be for project periods up to five years in duration and are renewable.

Other Award Budget Information

Stipends, Tuition, and Fees

Ruth L. Kirschstein-NRSA awards provide stipends as a subsistence allowance to help defray living expenses during the research training experience.

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NIH will contribute to the combined cost of tuition and fees at the rate in place at the time of award.

Stipend levels, as well as funding amounts for tuition and fees and the institutional allowance are announced annually in the *NIH Guide for Grants* and *Contracts* and are also posted on the Ruth L. Kirschstein National Research Service Award (NRSA) <u>webpage</u> (https://researchtraining.nih.gov/resources/policy-notices).

Trainee Travel

Travel for trainees to attend scientific meetings and workshops that the institution determines to be necessary for the individual's research training experience is an allowable expense for predoctoral and postdoctoral trainees. This includes trainees on short-term appointments. Trainees must be appointed to the training grant at the time of the actual travel for this to be an allowable cost.

The amount of funds provided for trainee travel may vary by NIH Institute or Center; applicants are encouraged to consult the <u>Table of IC-Specific</u> <u>Information, Requirements and Staff Contacts (https://grants.nih.gov/guide/contacts/PA-25-168.html)</u> for further information.

Training Related Expenses

NIH will provide funds to help defray other research training expenses, such as health insurance, staff salaries, consultant costs, mentor training activities, equipment, research supplies, and faculty/staff travel directly related to the research training program. The most recent levels of training related expenses are announced annually in the *NIH Guide for Grants and Contracts,* and are also posted on the Ruth L. Kirschstein National Research Service Award (NRSA) webpage (https://researchtraining.nih.gov/resources/policy-notices).

Indirect Costs

Indirect Costs (also known as Facilities & Administrative [F&A] Costs) are reimbursed at 8% of modified total direct costs (exclusive of tuition and fees, consortium costs in excess of \$25,000, and expenditures for equipment), rather than on the basis of a negotiated rate agreement.

NIH grants policies as described in the <u>NIH Grants Policy Statement (//grants.nih.gov/grants/guide/url_redirect.php?id=11120)</u> will apply to the applications submitted and awards made from this NOFO.

Section III. Eligibility Information

1. Eligible Applicants

Eligible Organizations

Higher Education Institutions

- Public/State Controlled Institutions of Higher Education
- Private Institutions of Higher Education

Nonprofits Other Than Institutions of Higher Education

- Nonprofits with 501(c)(3) IRS Status (Other than Institutions of Higher Education)
- Nonprofits without 501(c)(3) IRS Status (Other than Institutions of Higher Education)

Local Governments

- Indian/Native American Tribal Governments (Federally Recognized)
- Indian/Native American Tribal Governments (Other than Federally Recognized)
- U.S. Territory or Possession

Other

- Native American Tribal Organizations (other than Federally recognized tribal governments)
- · Faith-based or Community-based Organizations

Federal Governments

- · Eligible Agencies of the Federal Government
- U.S. Territory or Possession

The sponsoring institution must assure support for the proposed program. Appropriate institutional commitment to the program includes the provision of adequate staff, facilities, and educational resources that can contribute to the planned program.

Foreign Organizations

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Non-domestic (non-U.S.) Entities (Foreign Institutions) are not eligible to apply.

Non-domestic (non-U.S.) components of U.S. Organizations are not eligible to apply.

Required Registrations

Applicant Organizations

Applicant organizations must complete and maintain the following registrations as described in the <u>How to Apply - Application Guide</u> (<u>https://grants.nih.gov/grants/guide/url_redirect.php?id=82400</u>), (//grants.nih.gov/grants/guide/url_redirect.php?id=82400)</u> to be eligible to apply for or receive an award. All registrations must be completed prior to the application being submitted. Registration can take 6 weeks or more, so applicants should begin the registration process as soon as possible. Failure to complete registrations in advance of a due date is not a valid reason for a late submission, please reference <u>NIH Grants Policy Statement Section 2.3.9.2 Electronically Submitted Applications</u> (//grants.nih.gov/grants/guide/url_redirect.php?id=82423) for additional information.

 <u>System for Award Management (SAM) (https://grants.nih.gov/grants/guide/url_redirect.php?id=82390)</u> – Applicants must complete and maintain an active registration, which requires renewal at least annually. The renewal process may require as much time as the initial registration.
 SAM registration includes the assignment of a Commercial and Government Entity (CAGE) Code for domestic organizations which have not already been assigned a CAGE Code.

- <u>NATO Commercial and Government Entity (NCAGE) Code (//grants.nih.gov/grants/guide/url_redirect.php?id=11176)</u> Foreign organizations
 must obtain an NCAGE code (in lieu of a CAGE code) in order to register in SAM.
- Unique Entity Identifier (UEI)- A UEI is issued as part of the SAM.gov registration process. The same UEI must be used for all registrations, as well as on the grant application.
- <u>eRA Commons (https://grants.nih.gov/grants/guide/url_redirect.php?id=11123)</u> Once the unique organization identifier is established, organizations can register with eRA Commons in tandem with completing their Grants.gov registration; all registrations must be in place by time of submission. eRA Commons requires organizations to identify at least one Signing Official (SO) and at least one Program Director/Principal Investigator (PD/PI) account in order to submit an application.
- <u>Grants.gov (//grants.nih.gov/grants/guide/url_redirect.php?id=82300)</u> Applicants must have an active SAM registration in order to complete the Grants.gov registration.

Program Directors/Principal Investigators (PD(s)/PI(s))

All PD(s)/PI(s) must have an eRA Commons account. PD(s)/PI(s) should work with their organizational officials to either create a new account or to affiliate their existing account with the applicant organization in eRA Commons. If the PD/PI is also the organizational Signing Official, they must have two distinct eRA Commons accounts, one for each role. Obtaining an eRA Commons account can take up to 2 weeks.

Eligible Individuals (Program Director/Principal Investigator)

Any individual(s) with the skills, knowledge, and resources necessary to carry out the proposed research training program as the Training Program Director/Principal Investigator (Training PD/PI) is invited to work with their organization to develop an application for support.

For institutions/organizations proposing multiple PDs/PIs, visit the <u>Multiple Program Director/Principal Investigator Policy</u> (//grants.nih.gov/grants/multi_pi/index.htm) and submission details in the Senior/Key Person Profile (Expanded) Component of the <u>How to Apply - Application Guide (https://grants.nih.gov/grants/guide/url_redirect.php?id=82400)</u>.

The PD/PI should be an established investigator in the scientific area in which the application is targeted and capable of providing both administrative and scientific leadership to the development and implementation of the proposed program. The PD/PI will be responsible for the selection and appointment of trainees to the approved research training program, and for the overall direction, management, administration, and evaluation of the program. The PD/PI will be expected to monitor and assess the program and submit all documents and reports as required. The PD/PI has responsibility for the day-to-day administration of the program and is responsible for appointing members of the Advisory Committee (when applicable), using their recommendations to determine the appropriate allotment of funds. Additional PDs/PIs, including individuals with experience in areas relevant to the program goals may be included to achieve the training goals.

2. Cost Sharing

This NOFO does not require cost sharing as defined in the <u>NIH Grants Policy Statement Section 1.2 Definition of Terms</u> (//grants.nih.gov/grants/guide/url redirect.php?id=11126).

3. Additional Information on Eligibility

Number of Applications

Applicant organizations may submit more than one application, provided that each application is programmatically distinct.

NIH will not accept duplicate or highly overlapping applications under review at the same time per <u>NIH Grants Policy Statement Section 2.3.7.4</u> <u>Submission of Resubmission Application (//grants.nih.gov/grants/guide/url_redirect.php?id=82415</u>). This means that the NIH will not accept:

- A new (A0) application that is submitted before issuance of the summary statement from the review of an overlapping new (A0) or resubmission (A1) application.
- A resubmission (A1) application that is submitted before issuance of the summary statement from the review of the previous new (A0) application.

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 An application that has substantial overlap with another application pending appeal of initial peer review (see <u>NIH Grants Policy Statement</u> 2.3.9.4 Similar, <u>Essentially Identical</u>, or Identical <u>Applications (//grants.nih.gov/grants/guide/url_redirect.php?id=82423)</u>)

Preceptors/Mentors

Program faculty should be active researchers in the biomedical sciences as demonstrated by recent publications and research support in the area of the proposed research training program. Programs are encouraged to recruit prospective preceptors/mentors and faculty with relevant experience and expertise to advance the program goals, including faculty at different career stages (for example, early stage investigators as well as senior faculty). When building a training team, programs should include faculty who are committed to training, mentoring, and providing safe and supportive research training environments. All program faculty should have a mentoring philosophy appropriately tailored to the needs of potential trainees that ensures trainees will receive the tailored mentorship needed to develop skills and advance their career. Program faculty should also have sufficient time to commit to training given their other professional obligations.

Trainees

The applicant organization will select the trainees to be supported by the research training program and is responsible for establishing trainee eligibility and selection criteria that are consistent with applicable law.

The individual to be trained must be a citizen or a noncitizen national of the United States or have been lawfully admitted for permanent residence at the time of appointment. Additional details on citizenship, training period, and aggregate duration of support are available in the <u>NIH Grants Policy</u> <u>Statement (//grants.nih.gov/grants/guide/url_redirect.php?id=61131)</u>.

All trainees are required to pursue their research training full time, normally defined as 40 hours per week, or as specified by the sponsoring institution in accordance with its own policies. Appointments are normally made in 12-month increments, and no trainee may be appointed for less than 9 months during the initial period of appointment, except with prior approval of the awarding unit, or when trainees are appointed to approved, short-term training positions.

Predoctoral trainees. Predoctoral trainees must be enrolled in a program leading to a PhD or in an equivalent research doctoral degree program. Health-professional students who wish to interrupt their studies for a year or more to engage in full-time research training before completing their formal training programs, are also eligible.

Postdoctoral trainees. Postdoctoral trainees must have received, as of the beginning date of the NRSA appointment, a Ph.D., M.D., D.D.S., or comparable doctoral degree from an accredited domestic or foreign institution. Comparable doctoral degrees include, but are not limited to, the following: D.M.D., DC, DO, DVM., OD, DPM, ScD, EngD, DrPH, DNSc, DPT, PharmD, ND (Doctor of Naturopathy), DSW, PsyD, as well as a doctoral degree in nursing research. Documentation by an authorized official of the degree-granting institution certifying all degree requirements have been met prior to the beginning date of the training appointment is acceptable. Individuals in postgraduate clinical training, who wish to interrupt their studies for a year or more to engage in full-time research training before completing their formal training programs, are also eligible.

Short-term trainees.

Trainees selected for short-term training are required to pursue research training for 2-3 months on a full-time basis devoting at least 40 hours per week, or as specified by the sponsoring institution in accordance with its own policies. Within the full-time training period, trainees must devote their time to the proposed research training and must confine clinical duties to those that are an integral part of the research training experience. Successful trainees may be appointed for additional periods of short-term training or, if appropriate to their career level, they should be encouraged to apply for an extended period of full-time training supported by an NRSA training grant or fellowship, or an NIH career development award.

Short-term training is not intended, and may not be used, to support activities that would ordinarily be part of a research degree program, nor for any undergraduate-level training.

Short-term trainees must be medical students, dental students, students in other health-professional programs, or graduate students in the physical or quantitative sciences. To be eligible for short-term, predoctoral research training positions students must be enrolled, in good standing, and must have completed at least one quarter or semester in a program leading to a clinical doctorate or a doctorate in a physical or quantitative science such as physics, mathematics, or engineering before participating in the training program. Individuals already matriculated in a formal research degree program in the health sciences, or those holding a research doctorate, a master's degree, or a combined health-professional/research doctorate normally are not eligible for short-term training positions. Within schools of pharmacy, only individuals who are candidates for the PharmD degree are eligible for short-term, research training positions.

Section IV. Application and Submission Information

1. Requesting an Application Package

The application forms package specific to this opportunity must be accessed through ASSIST, Grants.gov Workspace or an institutional system-tosystem solution. Links to apply using ASSIST or Grants.gov Workspace are available in Part 1 of this NOFO. See your administrative office for instructions if you plan to use an institutional system-to-system solution.

2. Content and Form of Application Submission

It is critical that applicants follow the Training (T) Instructions in the How to Apply - Application Guide

(https://grants.nih.gov/grants/guide/url_redirect.php?id=82400) except where instructed in this Notice of Funding Opportunity to do otherwise. Conformance to the requirements in the <u>How to Apply - Application Guide (https://grants.nih.gov/grants/guide/url_redirect.php?id=82400)</u> is required and strictly enforced. Applications that are out of compliance with these instructions may be delayed or not accepted for review.

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All page limitations described in the <u>How to Apply - Application Guide (https://grants.nih.gov/grants/guide/url_redirect.php?id=82400)</u> and the <u>Table of</u> <u>Page Limits (//grants.nih.gov/grants/guide/url_redirect.php?id=11133)</u> must be followed.

Instructions for Application Submission

The following section supplements the instructions found in the <u>How to Apply - Application Guide (https://grants.nih.gov/grants/guide/url_redirect.php?</u> <u>id=82400</u>) and should be used for preparing an application to this NOFO.

SF424(R&R) Cover

All instructions in the How to Apply - Application Guide (https://grants.nih.gov/grants/guide/url_redirect.php?id=82400) must be followed.

SF424(R&R) Project/Performance Site Locations

All instructions in the How to Apply - Application Guide (https://grants.nih.gov/grants/guide/url_redirect.php?id=82400) must be followed.

SF424 (R&R) Other Project Information

All instructions in the How to Apply - Application Guide (https://grants.nih.gov/grants/guide/url_redirect.php?id=82400) must be followed.

Project Summary/Abstract. Provide an abstract of the entire application. Include the goals, objectives, rationale and design of the research training/career development program, as well as key activities in the training plan. Indicate the planned duration of appointments, the projected number of trainees/scholars including their levels (i.e., predoctoral, postdoctoral, short-term), and intended trainee/scholar outcomes.

Other Attachments. An Advisory Committee is not a required, but a highly recommended component of a training program. However, if an Advisory Committee is intended, provide a plan for the appointment of an Advisory Committee to monitor progress of the training program. The composition, roles, responsibilities, and desired expertise of committee members, frequency of committee meetings, and other relevant information should be included. Describe how the Advisory Committee will evaluate the overall effectiveness of the program. Proposed Advisory Committee members should be named in the application if they have been invited to participate at the time the application is submitted. Renewal applications with Advisory Committee should include the names of all committee members during the past project period. Please name your file "Advisory_Committee.pdf".

The filename provided for each "Other Attachment" will be the name used for the bookmark in the electronic application in eRA Commons.

SF424(R&R) Senior/Key Person Profile Expanded

Follow all instructions provided in the How to Apply - Application Guide (https://grants.nih.gov/grants/guide/url_redirect.php?id=82400).

PHS 398 Cover Page Supplement

Follow all instructions provided in the How to Apply - Application Guide (https://grants.nih.gov/grants/guide/url_redirect.php?id=82400).

PHS 398 Training Subaward Budget Attachment(s)

Follow all instructions provided in the How to Apply - Application Guide (https://grants.nih.gov/grants/guide/url_redirect.php?id=82400).

Training Budget

Follow all instructions provided in the <u>How to Apply - Application Guide (https://grants.nih.gov/grants/guide/url_redirect.php?id=82400)</u> with the following additional modifications:

• Include all personnel other than the Training PD(s)/PI(s) in the Other Personnel section, including clerical and administrative staff.

PHS 398 Research Training Program Plan

The PHS 398 Research Training Program Plan Form is comprised of the following sections:

- Training Program
- Faculty, Trainees, and Training Record
- Other Training Program
- Appendix Note that the Appendix should only be used in circumstances covered in the NIH policy on appendix materials or if the NOFO specifically instructs applicants to do so.

Follow all instructions provided in the How to Apply - Application Guide (https://grants.nih.gov/grants/guide/url_redirect.php?id=82400).

The following modifications apply:

Particular attention must be given to the required <u>Training Data Tables (//grants.nih.gov/grants/guide/url_redirect.php?id=61169</u>). Applicants should summarize, in the body of the application, key data from the tables that highlight the characteristics of the prospective candidate pool, faculty mentors, the educational and career outcomes of past participants, and other factors that contribute to the overall environment of the program.

Training Program

In addition to the information specified in the Application Guide, describe the following for each section of the Program Plan attachment:

Background

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The application should clearly describe the goals (i.e., broad statement of purpose of the program), and objectives (i.e., specific measurable outcomes the program intends to achieve) of the proposed research training program. The program-specific goals and objectives should align with the Program Objective of this funding announcement while focusing on developing the specific skills required to be a well-trained scientist in the proposed scientific discipline(s).

The application should describe how the program will develop a pool of well-trained scientists who have the technical, operational, and professional skills required to conduct research in a safe, ethically responsible and rigorous manner, and to enter careers in the biomedical research workforce as delineated in the Program Objective. The application should describe how the program will enhance the training environment and not simply provide financial support to trainees.

Program Plan

Program Administration (Training Program Director(s)/Principal Investigator(s))

The application should describe how the Training Program Director(s)/Principal Investigator(s) (PDs/PIs) will promote the success of the trainees and training program. Multiple PDs/PIs are encouraged, particularly when each brings a unique skill set that will enhance training. The application should expand on the information in the biosketch(es) to address how the PD/PI or PD/PI team has:

- The appropriate expertise (for example, a record of rigorous research), as well as the administrative and training experience to provide strong leadership, direction, management, and administration of the proposed research training program.
- The time to commit sufficient effort to ensure the program's success, given other professional obligations (applicants should indicate the program director's percent effort in the proposed program).
- A demonstrated commitment to training future biomedical research researchers.
- Received training (or have a plan in place to ensure they receive training) on how to effectively mentor the entire trainee pool prior to the start of the program.

This section should describe how previous mentoring experiences of the PD(s)/PI(s) will support the success of the proposed training program.

Program Faculty

The application should describe (a) the faculty participants and (b) planned mentor training and oversight.

Faculty Participants, please describe:

• The efforts made to recruit a pool of prospective program faculty from various career stages with relevant experience and expertise to advance the program goals to enhance the training environment.

Mentor Training and Oversight, please describe:

- The planned strategy and administrative structure to oversee and monitor the program and ensure appropriate and timely trainee progress. This should include a mechanism to monitor mentoring, including oversight of the effectiveness of the trainee/participating faculty match, and a plan for removing faculty who continue to display unacceptable mentorship qualities from the training program.
- How the participating faculty are trained to ensure the use of evidence-informed mentoring practices that promote the development of all trainees. Include the planned format, duration, and frequency of mentor training activities for program faculty and a description of how mentor training has been tailored to the goals and objectives of the broader training program. Describe the major topics covered in mentor training. Examples of relevant topics include, but are not limited to:
 - · Aligning expectations.
 - Maintaining effective communication.
 - Fostering independence.
 - · Assessing scholars' understanding of scientific research.
 - · Enhancing professional development.
 - Articulating your mentoring philosophy and plan.

Proposed Training

In addition to the information specified in the Application Guide, describe:

- How the training activities will employ evidence-informed approaches to trainee learning, mentorship, and professional development, and how
 these activities will address the program's training goals and objectives.
- How trainees will be instructed on data science principles that are relevant to their areas of research. Examples include statistics, computational science, bioinformatics, data sharing and access, data management, data security, and data privacy in human subjects research.

Career Development

The proposed training should include a section on career development activities for trainees involved in the program, and should describe:

- How the pool of potential applicants and trainees will be provided with information about the overall biomedical research workforce employment landscape, the variety of careers in the biomedical research workforce for which their training would be useful, and the career outcomes of graduates of the program (e.g., on publicly accessible websites).
- How the proposed program will engage a range of potential employers to ensure the trainees will acquire the appropriate skills, knowledge, and steps needed to attain positions in the sectors of the biomedical research workforce that are of interest to them and consistent with their values.

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 How the training program or institution will provide appropriate experiential learning opportunities (e.g., internships, shadowing, informational interviews, teaching opportunities) that allow trainees to develop the professional skills and networks necessary to transition into careers in the biomedical research workforce.

Training Program Evaluation

The application should describe:

- How the proposed evaluation will assess the extent to which the overall program is effective in meeting its training goals and objectives, and whether the research training environment is supportive of trainee development.
- The program's procedures for responding to program evaluation findings.

Trainee Candidates and Retention Plans

Through the narrative and summaries of the information presented in the <u>Training Data Tables (https://grants.nih.gov/grants/forms/data-tables.htm)</u> and the attachments, the application should:

- Provide a strong justification for the number of requested trainee positions.
- Describe a multifactorial candidate review process (i.e., a process that considers metrics beyond previous institution, GPA, and standardized test scores) that will allow research-oriented trainees who have taken advantage of the research opportunities available to them and are committed to contributing to the biomedical research enterprise the ability to participate in the training program. Programs are encouraged to consider individuals who have the potential to strongly benefit from, and with proper training and support, succeed in the program (see also, Program Considerations in section I above).

Retention Plans

Describe efforts to sustain the scientific interests as well as monitor the academic and research progress of trainees from all backgrounds within the program (i.e., retention). Applicants are encouraged to use evidence-informed practices for retention with the recognition that the variety of trainee educational backgrounds and experiences may necessitate the need to tailor retention approaches. Describe the specific efforts to be undertaken by the training program and how these might coordinate with broader trainee retention efforts of the institution(s).

Institutional Environment and Commitment to Training

• The application should describe how the level of institutional and departmental commitment to research training will promote the success of the trainees and training program. This includes providing a safe and supportive research training environment with procedures to ensure accountability and reporting of concerns. For institutions that have multiple NIH-funded training grants, the letter should also explain what distinguishes the proposed program from existing ones at the same training level, how the programs will synergize and share resources when appropriate, and how the training faculty, pool of potential trainees, and resources are sufficiently robust to support the proposed program in addition to existing ones. A letter providing assurances of the institutional commitment should be provided in the Letters of Support section of the application. Detailed instructions on the types of support are found below in the Letters of Support section of the NOFO. Do not repeat information contained elsewhere in the application.

Training Outcomes

This section is intended to provide outcomes for the program described in the application (or for new programs, to provide outcomes for recent graduates in similar training to the proposed program). The application should provide the information below about recent outcomes through narrative descriptions and a summary of the data presented in the required <u>training tables (https://grants.nih.gov/grants/forms/data-tables.htm)</u>. The application should describe the following:

- Evidence that recent program graduates conducted rigorous research that advanced scientific knowledge and/or technologies, with increasing self-direction (e.g., peer-reviewed publications in <u>Training Table 5 (https://grants.nih.gov/grants/forms/data-tables.htm)</u>, or other measures of scientific accomplishment appropriate to the field);
- The rate of program completion and length of training (for predoctoral trainees, explain how time-to-degree <u>Training Table 8</u> (<u>https://grants.nih.gov/grants/forms/data-tables.htm</u>)).
- The success of recent graduates transitioning to careers in the biomedical research workforce (<u>Training Table 8</u>). (<u>https://grants.nih.gov/grants/forms/data-tables.htm</u>)

If disparities are observed in trainee outcomes, describe approaches to identify the causes and, where warranted, the approaches to feasibly address the issues in the Program Plan.

Progress Report for Renewal Applications

For renewal applications include information in the "Program Overview" section to demonstrate that the program successfully trained a pool of individuals who have the technical, operational, and professional skills to transition into careers in the biomedical research workforce. Highlight how the training program has evolved in response to changes in relevant scientific and technical knowledge, educational practices, and evaluation of the training program. Describe successes and challenges with implementation of the programmatic elements described in the previous application (e.g., curricular elements, mentor training activities, efforts to promote safe and supportive research training environments) and provide justifications for failing to implement previously proposed programmatic elements. Include success rates for graduation and successful transitions to postdoc or careers in the biomedical research workforce and describe how the program made aggregate data on training and career outcomes publicly available.

Faculty, Trainees, and Training Record

https://grants.nih.gov/grants/guide/pa-files/PA-25-168.html

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Program faculty are encouraged to provide a personal statement that describes their prior experience with:

- Training, mentoring, and promoting a supportive scientific environment.
- · Providing training in rigorous and unbiased experimental design, methodology, analysis, interpretation, and reporting of results.
- Aiding and supporting trainees in identifying and transitioning into careers in the biomedical research workforce that are consistent with trainees' skills, interests, and values.

Letters of Support

Institutional Support Letter. The application must include a signed letter on institutional letterhead from a President, Provost, Dean or key institutional leader that describes the activities and resources provided by the institution that will ensure the success of the planned training program and the productivity of its trainees (not to exceed 10 pages). Institutional commitment to the following areas must also be described in the letter:

- Developing and promoting a culture in which the highest standards of scientific rigor, reproducibility and responsible conduct are advanced.
- Ensuring sufficient resources and support will be available to the training faculty and trainees, for example, to permit early stage faculty to
 participate in training and trainees to continue in training if their mentors experience a hiatus in research funding.
- Supporting core facilities and technology resources and describing how they can be used to enhance training.
- Providing adequate staff, facilities, and educational resources to the planned program.
- Supporting the PDs/PIs and other key staff associated with the planned training program; ensuring faculty have protected time available to
 devote to mentoring, training and research; considering activities integral to excellent training (such as teaching and mentorship) in tenure and
 promotion decisions.
- Promoting safe and supportive research training environments at all levels (trainees, staff, faculty, and leadership); ensuring the research facilities and laboratory practices promote the safety of trainees (see The NIH Grants Policy Statement <u>Section 4</u> (<u>https://grants.nih.gov/grants/policy/nihgps/HTML5/section_4/4_public_policy_requirements_objectives_and_other_appropriation_mandates.htm</u>) regarding NIH recipient institutions expectations to provide safe and healthful working condition for their employees and foster work environments conducive to high-quality research.
- Ensuring that proper policies, procedures, and oversight are in place to prevent discrimination, harassment and other discriminatory practices and to appropriately respond to allegations of such discriminatory practices, including providing any required notifications to NIH (see <u>NOT-OD-</u> <u>20-124 (https://grants.nih.gov/grants/guide/notice-files/NOT-OD-20-124.html)</u>).
- · Providing the types and levels of support necessary for trainees to successfully complete the research training program.
- Supporting evaluation of the training program and procedures for responding to evaluation findings.

Other Training Program Section

Appendix:

Limited items are allowed in the Appendix. Follow all instructions for the Appendix as described in the <u>How to Apply - Application Guide</u> (<u>https://grants.nih.gov/grants/guide/url_redirect.php?id=82400</u>); any instructions provided here are in addition to the <u>How to Apply - Application Guide</u> (<u>https://grants.nih.gov/grants/guide/url_redirect.php?id=82400</u>); any instructions.

PHS Assignment Request Form

All instructions in the How to Apply - Application Guide (https://grants.nih.gov/grants/guide/url_redirect.php?id=82400) must be followed.

3. Unique Entity Identifier and System for Award Management (SAM)

See Part 2. Section III.1 for information regarding the requirement for obtaining a unique entity identifier and for completing and maintaining active registrations in System for Award Management (SAM), NATO Commercial and Government Entity (NCAGE) Code (if applicable), eRA Commons, and Grants.gov

4. Submission Dates and Times

Part I. contains information about Key Dates and times. Applicants are encouraged to submit applications before the due date to ensure they have time to make any application corrections that might be necessary for successful submission. When a submission date falls on a weekend or <u>Federal holiday (https://grants.nih.gov/grants/guide/url_redirect.php?id=82380)</u>, the application deadline is automatically extended to the next business day.

Organizations must submit applications to <u>Grants.gov (//grants.nih.gov/grants/guide/url_redirect.php?id=11128)</u> (the online portal to find and apply for grants across all Federal agencies). Applicants must then complete the submission process by tracking the status of the application in the <u>eRA</u> <u>Commons (https://grants.nih.gov/grants/guide/url_redirect.php?id=11123</u>)</u>, NIH's electronic system for grants administration. NIH and Grants.gov systems check the application against many of the application instructions upon submission. Errors must be corrected and a changed/corrected application must be submitted to Grants.gov on or before the application due date and time. If a Changed/Corrected application is submitted after the deadline, the application will be considered late. Applications that miss the due date and time are subjected to the NIH Policy on Late Application Submission.

Applicants are responsible for viewing their application before the due date in the eRA Commons to ensure accurate and successful submission.

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Information on the submission process and a definition of on-time submission are provided in the <u>How to Apply - Application Guide</u> (<u>https://grants.nih.gov/grants/guide/url_redirect.php?id=82400</u>).

5. Intergovernmental Review (E.O. 12372)

This initiative is not subject to intergovernmental review (https://grants.nih.gov/grants/policy/nihgps/html5/section_10/10.10.1_executive_orders.htm).

6. Funding Restrictions

All NIH awards are subject to the terms and conditions, cost principles, and other considerations described in the <u>NIH Grants Policy Statement</u> (<u>//grants.nih.gov/grants/guide/url_redirect.php?id=11120</u>). The <u>National Research Service Award (NRSA) policies</u> (<u>//grants.nih.gov/grants/guide/url_redirect.php?id=41171</u>)</u> apply to this program. An NRSA appointment may not be held concurrently with another Federally sponsored fellowship, traineeship, or similar Federal award that provides a stipend or otherwise duplicates provisions of the NRSA.

Pre-award costs are allowable only as described in the NIH Grants Policy Statement Section 7.9.1 Selected Items of Cost

(//grants.nih.gov/grants/guide/url_redirect.php?id=11143). Note, however, that pre-award costs are not allowable charges for stipends or tuition/fees on institutional training grants because these costs may not be charged to the grant until a trainee has actually been appointed and the appropriate paperwork submitted to the NIH awarding component. Any additional costs associated with the decision to allow research elective credit for short-term research training are not allowable charges on an institutional training grant.

7. Other Submission Requirements and Information

Applications must be submitted electronically following the instructions described in the <u>How to Apply - Application Guide</u> (<u>https://grants.nih.gov/grants/guide/url_redirect.php?id=82400</u>). Paper applications will not be accepted.

Applicants must complete all required registrations before the application due date. Section III. Eligibility Information contains information about registration.

For assistance with your electronic application or for more information on the electronic submission process, visit <u>How to Apply – Application Guide</u> (<u>https://grants.nih.gov/grants/how-to-apply-application-guide.html</u>). If you encounter a system issue beyond your control that threatens your ability to complete the submission process on-time, you must follow the <u>Dealing with System Issues (https://grants.nih.gov/grants/how-to-apply-application-guide.html</u>) guidance. For assistance with application submission, contact the Application Submission Contacts in Section VII.

Important reminders:

All PD(s)/PI(s) must include their eRA Commons ID in the Credential field of the Senior/Key Person Profile form. Failure to register in the Commons and to include a valid PD/PI Commons ID in the credential field will prevent the successful submission of an electronic application to NIH.

The applicant organization must ensure that the unique entity identifier provided on the application is the same identifier used in the organization's profile in the eRA Commons and for the System for Award Management. Additional information may be found in the <u>How to Apply - Application Guide</u> (<u>https://grants.nih.gov/grants/guide/url_redirect.php?id=82400</u>).

See more tips (//grants.nih.gov/grants/guide/url_redirect.php?id=11146) for avoiding common errors.

Upon receipt, applications will be evaluated for completeness and compliance with application instructions by the Center for Scientific Review and responsiveness by components of participating organizations, NIH. Applications that are incomplete, non-compliant and/or nonresponsive will not be reviewed.

Upon receipt, applications will be evaluated for completeness and compliance with application instructions by the Center for Scientific Review, NIH. Applications that are incomplete or non-compliant will not be reviewed.

Requests of \$500,000 or more for direct costs in any year

Applicants requesting \$500,000 or more in direct costs in any year (excluding consortium F&A) must contact a Scientific/ Research Contact at least 6 weeks before submitting the application and follow the Policy on the Acceptance for Review of Unsolicited Applications that Request \$500,000 or More in Direct Costs as described in the <u>How to Apply - Application Guide (https://grants.nih.gov/grants/guide/url_redirect.php?id=82400)</u>. Applicants are advised to refer to the <u>Table of IC-Specific Information, Requirements and Staff Contacts (https://grants.nih.gov/guide/contacts/PA-25-168.html)</u> for exceptions.

Mandatory Disclosure

Recipients or subrecipients must submit any information related to violations of federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the federal award. See Mandatory Disclosures, <u>2 CFR 200.113 (https://www.ecfr.gov/current/title-2/subtitle-A/chapter-II/part-200/subpart-B/section-200.113)</u> and <u>NIH Grants Policy Statement Section 4.1.35</u>

(https://grants.nih.gov/grants/policy/nihgps/html5/section_4/4.1.35_mandatory_disclosures.htm).

Send written disclosures to the NIH Chief Grants Management Officer listed on the Notice of Award for the IC that funded the award and to the <u>HHS</u> <u>Office of Inspector Grant Self Disclosure Program (https://oig.hhs.gov/compliance/self-disclosure-info/hhs-oig-grant-self-disclosure-program/)</u> at <u>grantdisclosures@oig.hhs.gov (mailto:grantdisclosures@oig.hhs.gov)</u>

Post Submission Materials

Applicants are required to follow the instructions for post-submission materials, as described in <u>the policy</u> (//grants.nih.gov/grants/guide/url_redirect.php?id=82299).

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1. Criteria

Only the review criteria described below will be considered in the review process.

Applications submitted to the NIH in support of the <u>NIH mission (//grants.nih.gov/grants/guide/url_redirect.php?id=11149</u>) are evaluated for scientific and technical merit through the NIH peer review system. While any information in the application relevant to the program goals can be included as part of the review process, the race, ethnicity, or sex of trainee candidates, trainees, or faculty may not be used as factors in the evaluation of applications.

For this particular NOFO, note the following: Reviewers should evaluate the program's potential to:

- Produce a pool of trainees with the technical, operational, and professional skills necessary to conduct rigorous and reproducible research, and
 transition into careers in the biomedical research workforce. Reviewers should note that careers in the biomedical research workforce refers to
 the breadth of careers that sustain the biomedical research enterprise (which includes, but is not exclusive to, careers as independent NIHfunded investigators).
- Enable research-oriented individuals from a range of educational backgrounds the ability to participate and succeed in the research training program (for example, through recruitment and mentor training activities).

Overall Impact

Reviewers will provide an overall impact score to reflect their assessment of the likelihood that the proposed training program will equip the trainees with the skills, knowledge and experiences necessary to transition to successful careers in the biomedical research workforce, in consideration of the following review criteria and additional review criteria (as applicable for the project proposed.)

Scored Review Criteria

Reviewers will consider each of the review criteria below in the determination of the merit of the training program and give a separate score for each. When applicable, the reviewers will consider relevant questions in the context of proposed short-term training. An application does not need to be strong in all categories to be judged likely to have major biomedical research training impact.

Training Program and Environment

- Does the application provide a compelling rationale for the proposed research training program and propose appropriate training goals and objectives relevant to the rationale?
- Will the courses, structured training activities, mentoring, and research experiences achieve the training program's goals and objectives, and provide opportunities for trainees to acquire skill and expertise in transparent, rigorous, reproducible and relevant research methodologies and tools applicable to the goals of the training program?
- Is there an effective mechanism to monitor mentoring and to promote the development, retention and success of all trainees throughout their training?
- Will the proposed training program provide the trainees appropriate information regarding the breadth of careers in the biomedical research workforce for which their training may be useful, and appropriate learning opportunities that allow them to develop the professional skills and networks necessary to transition into those careers?
- Does the research training environment have adequate and appropriate facilities to support the proposed research training program?
- Is the level of institutional commitment to the training program, including administrative and research training support, sufficient to promote the success of the program?
- Is it clear how the proposed training program is distinguished from other externally funded training programs at the institution?

Training Program Director(s)/Principal Investigator(s) (PD(s)/PI(s))

- Do the PD(s)/PI(s) have the appropriate background, expertise, and administrative and training experience to provide strong leadership, direction, management, and administration of the proposed research training program?
- Do the PD(s)/PI(s) plan to commit sufficient effort to promote the program's success?
- Have the PD(s)/PI(s) demonstrated a strong commitment to training future researchers?
- Does the application describe how the PD(s)/PI(s) will receive appropriate training on effective mentoring practices to promote trainee success?
- For applications designating multiple PDs/PIs:
 - Is a strong justification provided that the multiple PD/PI leadership approach will benefit the training program and the trainees?
 - Is a strong and compelling leadership approach evident, including the designated roles and responsibilities, governance, and
 organizational structure consistent with and justified by the aims of the training program and the complementary expertise of the
 PDs/PIs?

Preceptors/Mentors

- Does the proposed program demonstrate the presence of a sufficient pool of preceptors/mentors with appropriate expertise and adequate resources available to support the training goals and objectives proposed in the application (including short-term training, if applicable)?
- Is there a strong plan to ensure participating faculty receive appropriate training in the use of evidence-informed mentoring practices that promote the development of all trainees?
- Do participating faculty appropriately promote the trainees' career progression?

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Trainees

- Does the proposed program demonstrate the presence of a sufficient pool of potential trainees in appropriate disciplines and training stages to achieve the training program's objectives (including short-term training, if applicable)? Do the recruitment strategies identify trainee candidates with the potential to strongly benefit from, and with proper training and support, succeed in the training program?
- Does the program propose an appropriate multifactorial candidate review process to allow a broad group of research-oriented trainees the ability to participate in the training program (for example, a process that considers, consistent with applicable law, metrics beyond previous institution, GPA, and standardized test scores)?
- Are there well-defined and justified selection and re-appointment criteria?

Training Record

- How successful are the trainees (or, for new applications, recent graduates in similar training) in completing the program?
- Does the application provide evidence that trainees (or, for new applications, other recent graduates in similar training) conducted rigorous research that, appropriate to the training stage of the proposed program, advanced scientific knowledge and/or technologies with increasing self-direction (such as peer-reviewed publications and other accomplishments appropriate to the field)?
- How successful are the trainees (or, for new applications, recent graduates in similar training) in transitioning to careers in the biomedical research workforce that utilize their training and directly benefit the broader biomedical research enterprise?
- If disparities are observed in outcomes for trainees (or, for new applications, recent graduates in similar training), has the program proposed adequate approaches to identify the causes and, where warranted, approaches to feasibly address them?
- Does the program propose a rigorous evaluation plan to assess the effectiveness of the training program and the extent to which it is meeting its overall goals and objectives? Are effective mechanisms in place for obtaining feedback from current and former trainees, and appropriate plans to respond to trainee feedback?
- For applications that request short-term research training positions, is there a record of retaining health professional trainees in research training or other research activities for at least two years?

Additional Review Criteria

As applicable for the project proposed, reviewers will evaluate the following additional items while determining scientific and technical merit, and in providing an overall impact score, but will not give separate scores for these items.

Protections for Human Subjects

Generally not applicable. Reviewers should bring any concerns to the attention of the Scientific Review Officer.

Inclusion of Women, Minorities, and Individuals Across the Lifespan

Generally not applicable. Reviewers should bring any concerns to the attention of the Scientific Review Officer.

Vertebrate Animals

Generally not applicable. Reviewers should bring any concerns to the attention of the Scientific Review Officer.

Biohazards

Generally not applicable. Reviewers should bring any concerns to the attention of the Scientific Review Officer.

Training in the Responsible Conduct of Research

All applications for support under this NOFO must include a plan to fulfill NIH requirements for instruction in the Responsible Conduct of Research (RCR). Taking into account the specific characteristics of the training program, the level of trainee experience, and the particular circumstances of the trainees, the reviewers will evaluate the adequacy of the proposed RCR training in relation to the following five required components: 1) *Format -* Does the plan satisfactorily address the format of instruction, e.g., lectures, coursework and/or real-time discussion groups, including face-to-face interaction? (*A plan involving only on-line instruction is not acceptable.*); 2) *Subject Matter –* Does the plan include a sufficiently broad selection of subject matter, such as conflict of interest, authorship, data management, human subjects and animal use, laboratory safety, research misconduct, research ethics? 3) *Faculty Participation -* Does the plan adequately describe how faculty will participate in the instruction? For renewal applications, are all training faculty who served as course directors, speakers, lecturers, and/or discussion leaders during the past project period named in the application? 4) *Duration of Instruction –* Does the plan meet the minimum requirements for RCR, i.e., at least eight contact hours of instruction? 5) *Frequency of Instruction –* Does the plan meet the minimum requirements for RCR, i.e., at least once during each career stage (undergraduate, post-baccalaureate, predoctoral, postdoctoral, and faculty levels) and at a frequency of no less than once every four years?

For renewal applications, does the progress report document acceptable RCR instruction in the five components described above? Does the plan describe how participation in RCR instruction is being monitored? Are appropriate changes in the plan for RCR instruction proposed in response to feedback and in response to evolving issues related to responsible conduct of research?

Training in Methods for Enhancing Reproducibility

Does the plan for Instruction in Methods for Enhancing Reproducibility describe how the program will provide training in scientific reasoning, rigorous research design, relevant experimental methods, consideration of relevant biological variables such as sex, authentication of key biological and/or chemical resources, quantitative approaches, and data analysis and interpretation, appropriate to field of study and the level and prior preparation of the trainees?

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For renewal applications, does the application document appropriate changes in the plan for Methods for Enhancing Reproducibility in response to feedback and to evolving issues related to the conduct of rigorous and reproducible research?

Resubmissions

For Resubmissions, the committee will evaluate the application as now presented, taking into consideration the responses to comments from the previous scientific review group and changes made to the project.

Renewals

For Renewals, the committee will consider the progress made in the last funding period.

- Does the application describe the program's accomplishments over the past funding period(s)? Is the program achieving its training objectives?
- To what extent have the training goals and objectives been achieved since the last cycle? If certain goals were not met, did the program provide reasonable explanations and describe appropriate alternative approaches taken?
- Has the program evaluated the quality and effectiveness of the training experience (and when applicable, short-term training experience), and is there evidence that the evaluation outcomes and feedback from trainees have been acted upon?
- Are appropriate changes proposed that are likely to improve or strengthen the research training experience during the next project period (may not be applicable to short-term training)?
- Does the program use current, evidence-informed training and mentoring approaches and continue to evolve and reflect changes in the research area in which the training occurs?

Revisions

For Revisions, the committee will consider the appropriateness of the proposed expansion of the scope of the project. If the Revision application relates to a specific aspect of the original application that was not recommended for approval by the committee, then the committee will consider whether the responses to comments from the previous scientific review group are adequate and whether substantial changes are clearly evident.

Additional Review Considerations

As applicable for the project proposed, reviewers will consider each of the following items, but will not give scores for these items, and should not consider them in providing an overall impact score.

Select Agent Research

Reviewers will assess the information provided in this section of the application, including (1) the Select Agent(s) to be used in the proposed research, (2) the registration status of all entities where Select Agent(s) will be used, (3) the procedures that will be used to monitor possession use and transfer of Select Agent(s), and (4) plans for appropriate biosafety, biocontainment, and security of the Select Agent(s).

Budget and Period of Support

Reviewers will consider whether the budget and the requested period of support are fully justified and reasonable in relation to the proposed research.

2. Review and Selection Process

Applications will be evaluated for scientific and technical merit by (an) appropriate Scientific Review Group(s), convened by the sponsoring Institute or Center in accordance with <u>NIH peer review policy and procedures (//grants.nih.gov/grants/guide/url_redirect.php?id=11154</u>), using the stated review criteria. Assignment to a Scientific Review Group will be shown in the eRA Commons.

As part of the scientific peer review, all applications will receive a written critique.

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.

Applications will be assigned on the basis of established PHS referral guidelines to the appropriate NIH Institute or Center. Applications will compete for available funds with all other recommended applications. Following initial peer review, recommended applications will receive a second level of review by the appropriate national Advisory Council or Board.

The following will be considered in making funding decisions, consistent with applicable law:

- · Scientific and technical merit of the proposed project as determined by scientific peer review.
- · Availability of funds.
- · Relevance of the proposed project to program priorities.

If the application is under consideration for funding, NIH will request "just-in-time" information from the applicant as described in the <u>NIH Grants Policy</u>. <u>Statement Section 2.5.1. Just-in-Time Procedures. (//grants.nih.gov/grants/guide/url_redirect.php?id=82418)</u> This request is not a Notice of Award nor should it be construed to be an indicator of possible funding.

Prior to making an award, NIH reviews an applicant's federal award history in SAM.gov to ensure sound business practices. An applicant can review and comment on any information in the Responsibility/Qualification records available in SAM.gov. NIH will consider any comments by the applicant in the Responsibility/Qualification records in SAM.gov to ascertain the applicant's integrity, business ethics, and performance record of managing Federal awards per 2 CFR Part 200.206 "Federal awarding agency review of risk posed by applicants." This provision will apply to all NIH grants and cooperative agreements except fellowships.

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3. Anticipated Announcement and Award Dates

After the peer review of the application is completed, the PD/PI will be able to access their Summary Statement (written critique) via the <u>eRA</u> <u>Commons (https://grants.nih.gov/grants/guide/url_redirect.php?id=11123</u>). Refer to Part 1 for dates for peer review, advisory council review, and earliest start date.

Information regarding the disposition of applications is available in the <u>NIH Grants Policy Statement (//grants.nih.gov/grants/guide/url_redirect.php?</u> id=11120).

Section VI. Award Administration Information

1. Award Notices

A Notice of Award (NoA) is the official authorizing document notifying the applicant that an award has been made and that funds may be requested from the designated HHS payment system or office. The NoA is signed by the Grants Management Officer and emailed to the recipient's business official.

In accepting the award, the recipient agrees that any activities under the award are subject to all provisions currently in effect or implemented during the period of the award, other Department regulations and policies in effect at the time of the award, and applicable statutory provisions.

Recipients must comply with any funding restrictions described in <u>Section IV.6. Funding Restrictions</u>. Any pre-award costs incurred before receipt of the NoA are at the applicant's own risk. For more information on the Notice of Award, please refer to the <u>NIH Grants Policy Statement Section 5. The</u> <u>Notice of Award (https://grants.nih.gov/grants/policy/nihgps/HTML5/section_5/5_the_notice_of_award.htm)</u> and NIH Grants & Funding website, see <u>Award Process. (https://grants.nih.gov/grants/pre-award-process.htm#award</u>)

2. Administrative and National Policy Requirements

The following Federal wide and HHS-specific policy requirements apply to awards funded through NIH:

- The rules listed at <u>2 CFR Part 200 (https://www.ecfr.gov/current/title-2/subtitle-A/chapter-II/part-200)</u>, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards.
- All NIH grant and cooperative agreement awards include the <u>NIH Grants Policy Statement (//grants.nih.gov/grants/guide/url_redirect.php?</u> <u>id=11120</u>) as part of the terms and conditions in the Notice of Award (NoA). The NoA includes the requirements of this NOFO. For these terms of award, see the <u>NIH Grants Policy Statement Part II: Terms and Conditions of NIH Grant Awards, Subpart A: General</u> (//grants.nih.gov/grants/guide/url_redirect.php?id=11120) and <u>Part II: Terms and Conditions of NIH Grant Awards, Subpart B: Terms and Conditions for Specific Types of Grants, Recipients, and Activities (//grants.nih.gov/grants/guide/url_redirect.php?id=11159).
 </u>
- If a recipient receives an award, the recipient must follow all applicable nondiscrimination laws. The recipient agrees to this when registering in SAM.gov. The recipient must also submit an Assurance of Compliance (<u>HHS-690 (https://www.hhs.gov/sites/default/files/form-hhs690.pdf)</u>). To learn more, see the <u>Laws and Regulations Enforced by the HHS Office for Civil Rights website (https://www.hhs.gov/civil-rights/for-providers/laws-regulations-guidance/laws/index.html)</u>.
 - HHS recognizes that NIH research projects are often limited in scope for many reasons that are nondiscriminatory, such as the principal investigator's scientific interest, funding limitations, recruitment requirements, and other considerations. Thus, criteria in research protocols that target or exclude certain populations are warranted where nondiscriminatory justifications establish that such criteria are appropriate with respect to the health or safety of the subjects, the scientific study design, or the purpose of the research. For additional guidance regarding how the provisions apply to NIH grant programs, please contact the Scientific/Research Contact that is identified in Section VII under Agency Contacts of this NOFO.

All federal statutes and regulations relevant to federal financial assistance, including those highlighted in <u>NIH Grants Policy Statement Section 4</u> <u>Public Policy Requirements, Objectives and Other Appropriation Mandates.</u>

(https://grants.nih.gov/grants/policy/nihgps/HTML5/section_4/4_public_policy_requirements_objectives_and_other_appropriation_mandates.htm)

Recipients are responsible for ensuring that their activities comply with all applicable federal regulations. NIH may terminate awards under certain circumstances. See <u>2 CFR Part 200.340</u> Termination (https://www.ecfr.gov/current/title-2/subtitle-A/chapter-II/part-200/subpart-D/subject-group-<u>ECFR86b76dde0e1e9dc/section-200.340</u>) and <u>NIH Grants Policy Statement Section 8.5.2 Remedies for Noncompliance or Enforcement Actions:</u> <u>Suspension, Termination, and Withholding of Support</u>

(https://grants.nih.gov/grants/policy/nihgps/html5/section_8/8.5.2_remedies_for_noncompliance_or_enforcement_actions-_suspension_termination_and_withholding_of_support.htm).

Institutional NRSA training grants must be administered in accordance with the current NRSA section of the <u>NIH Grants Policy Statement - Institutional</u> <u>Research Training Grants (//grants.nih.gov/grants/guide/url_redirect.php?id=61170)</u>.

The taxability of stipends is described in the <u>NIH Grants Policy Statement (//grants.nih.gov/grants/guide/url_redirect.php?id=41171)</u>. Policies regarding the Ruth L. Kirschstein-NRSA payback obligation are explained in the <u>NIH Grants Policy Statement (//grants.nih.gov/grants/guide/url_redirect.php?id=41171)</u>.

As specified in the NIH Revitalization Act of 1993, Kirschstein-NRSA recipients incur a service payback obligation for the first 12 months of postdoctoral support. Policies regarding the Ruth L. Kirschstein-NRSA payback obligation are explained in the <u>NIH Grants Policy Statement</u> (<u>//grants.nih.gov/grants/guide/url_redirect.php?id=41171</u>)</u>; and more details are in the <u>Frequently Asked Questions</u> (<u>//grants.nih.gov/grants/guide/url_redirect.php?id=61174</u>)</u>. Officials at the recipient institution have the responsibility of explaining the terms of the payback requirements to all prospective trainees before appointment to the training grant. Additionally, all trainees recruited into the training program

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should be provided with information related to the career options that might be available when they complete the program. The suitability of such career options as methods to satisfy the NRSA service payback obligation should be discussed.

Successful recipients under this NOFO agree that:

Where the award funding involves implementing, acquiring, or upgrading health IT for activities by any funded entity, recipients and subrecipient(s) are required to: Use health IT that meets standards and implementation specifications adopted in 45 CFR part 170, Subpart B, if such standards and implementation specifications can support the activity. Visit <u>https://www.ecfr.gov/current/title-45/subtitle-A/subchapter-D/part-170/subpart-B</u> (<u>https://www.ecfr.gov/current/title-45/subtitle-A/subchapter-D/part-170/subpart-B</u>) to learn more.

Where the award funding involves implementing, acquiring, or upgrading health IT for activities by eligible clinicians in ambulatory settings, or hospitals, eligible under Sections 4101, 4102, and 4201 of the HITECH Act, use health IT certified under the ONC Health IT Certification Program if certified technology can support the activity. Visit <u>https://www.healthit.gov/topic/certification-health-it</u> (<u>https://www.healthit.gov/topic/certification-health-it</u>) to learn more.

Pursuant to the Cybersecurity Act of 2015, Div. N, § 405, Pub. Law 114-113, 6 USC § 1533(d), the HHS Secretary has established a common set of voluntary, consensus-based, and industry-led guidelines, best practices, methodologies, procedures, and processes.

Successful recipients under this NOFO agree that:

When recipients, subrecipients, or third-party entities have:

- 1. ongoing and consistent access to HHS owned or operated information or operational technology systems; and
- 2. receive, maintain, transmit, store, access, exchange, process, or utilize personal identifiable information (PII) or personal health information (PII) obtained from the awarding HHS agency for the purposes of executing the award.

Recipients shall develop plans and procedures, modeled after the <u>NIST Cybersecurity framework (https://www.nist.gov/cyberframework)</u>, to protect HHS systems and data. Please refer to <u>NIH Post-Award Monitoring and Reporting (https://grants.nih.gov/grants/post-award-monitoring-and-reporting.htm</u>) for additional information.

Inventions and Copyrights

Awards made primarily for educational purposes are exempted from the PHS invention requirements and thus invention reporting is not required, as described in the <u>NIH Grants Policy Statement (//grants.nih.gov/grants/guide/url_redirect.php?id=61131)</u>.

Cooperative Agreement Terms and Conditions of Award

Not Applicable

3. Data Management and Sharing

Consistent with the 2023 NIH Policy for Data Management and Sharing, when data management and sharing is applicable to the award, recipients will be required to adhere to the Data Management and Sharing requirements as outlined in the <u>NIH Grants Policy Statement</u>. (https://grants.nih.gov/grants/policy/nihgps/HTML5/section 8/8.2.3 sharing research resources.htm#Data)

4. Reporting

When multiple years are involved, recipients will be required to submit the <u>Research Performance Progress Report (RPPR)</u> (<u>//grants.nih.gov/grants/rppr/index.htm</u>) annually. Continuation support will not be provided until the required forms are submitted and accepted.

Failure by the recipient institution to submit required forms in a timely, complete, and accurate manner may result in an expenditure disallowance or a delay in any continuation funding for the award. The Federal Funding Accountability and Transparency Act of 2006 as amended (FFATA), includes a requirement for recipients of Federal grants to report information about first-tier subawards and executive compensation under Federal assistance awards issued in FY2011 or later. All recipients of applicable NIH grants and cooperative agreements are required to report to the Federal Subaward Reporting System (FSRS) available at www.fsrs.gov (//grants.nih.gov/grants/guide/url_redirect.php?id=11170)) on all subawards over \$25,000. See the NIH Grants Policy Statement (//grants.nih.gov/grants/guide/url_redirect.php?id=82420)) for additional information on this reporting requirement.

Other Reporting Requirements

The institution must submit a completed Statement of Appointment (<u>PHS Form 2271 (//grants.nih.gov/grants/guide/url_redirect.php?id=61189</u>)) for each trainee appointed or reappointed to the training grant for 8 weeks or more. Recipients must submit the PHS 2271 data electronically using the xTrain system. More information on xTrain is available at <u>xTrain (eRA Commons) (//grants.nih.gov/grants/guide/url_redirect.php?id=41183</u>). An appointment or reappointment may begin any time during the budget period, but not before the budget period start date of the grant year.

A final RPPR, the expenditure data portion of the Federal Financial Report, and Termination Notices for all Trainees, are required for closeout of an award as described in the <u>NIH Grants Policy Statement Section 8.6 Closeout</u>

(https://grants.nih.gov/grants/policy/nihgps/HTML5/section_8/8.6_closeout.htm). NIH NOFOs outline intended research goals and objectives. Post award, NIH will review and measure performance based on the details and outcomes that are shared within the RPPR, as described at 2 CFR Part 200.301.

In accordance with the regulatory requirements provided at 45 CFR 75.113 and 2 CFR Part 200.113 and Appendix XII to 45 CFR Part 75 and 2 CFR Part 200, recipients that have currently active Federal grants, cooperative agreements, and procurement contracts from all Federal awarding agencies with a cumulative total value greater than \$10,000,000 for any period of time during the period of performance of a Federal award, must report and maintain the currency of information reported in the System for Award Management (SAM) about civil, criminal, and administrative proceedings in connection with the award or performance of a Federal award that reached final disposition within the most recent five-year period. The recipient must

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also make semiannual disclosures regarding such proceedings. Proceedings information will be made publicly available in the designated integrity and performance system (currently FAPIIS). This is a statutory requirement under section 872 of Public Law 110-417, as amended (41 U.S.C. 2313). As required by section 3010 of Public Law 111-212, all information posted in the designated integrity and performance system on or after April 15, 2011, except past performance reviews required for Federal procurement contracts, will be publicly available. Full reporting requirements and procedures are found in Appendix XII to 45 CFR Part 75 and 2 CFR Part 200 Award Term and Condition for Recipient Integrity and Performance Matters.

5. Evaluation

In carrying out its stewardship of human resource-related programs, NIH may request information essential to an assessment of the effectiveness of this program from databases and from participants themselves. Participants may be contacted after the completion of this award for periodic updates on various aspects of their employment history, publications, support from research grants or contracts, honors and awards, professional activities, and other information helpful in evaluating the impact of the program.

Section VII. Agency Contacts

We encourage inquiries concerning this funding opportunity and welcome the opportunity to answer questions from potential applicants.

Because of the difference in individual Institute and Center (IC) program requirements for this NOFO, prospective applications **MUST** consult the **Table of IC-Specific Information, Requirements, and Staff Contacts**, to make sure that their application is responsive to the requirements of one of the participating NIH ICs. Prior consultation with NIH staff is strongly encouraged.

Application Submission Contacts

eRA Service Desk (Questions regarding ASSIST, eRA Commons, application errors and warnings, documenting system problems that threaten ontime submission, and post-submission issues)

Finding Help Online: <u>https://www.era.nih.gov/need-help (https://www.era.nih.gov/need-help)</u> (preferred method of contact) Telephone: 301-402-7469 or 866-504-9552 (Toll Free)

General Grants Information (Questions regarding application processes and NIH grant resources) Email: <u>GrantsInfo@nih.gov (mailto:GrantsInfo@nih.gov)</u> (preferred method of contact) Telephone: 301-480-7075

Grants.gov Customer Support (Questions regarding Grants.gov registration and Workspace) Contact Center Telephone: 800-518-4726 Email: <u>support@grants.gov (mailto:support@grants.gov)</u>

Scientific/Research Contacts

See Table of IC-Specific Information, Requirements and Staff Contacts (https://grants.nih.gov/guide/contacts/PA-25-168.html)

Peer Review Contact(s)

Examine your eRA Commons account for review assignment and contact information (information appears two weeks after the submission due date).

Financial/Grants Management Contacts

See Table of IC-Specific Information, Requirements and Staff Contacts (https://grants.nih.gov/guide/contacts/PA-25-168.html)

Section VIII. Other Information

Recently issued trans-NIH <u>policy notices (//grants.nih.gov/grants/guide/url_redirect.php?id=11163)</u> may affect your application submission. A full list of policy notices published by NIH is provided in the <u>NIH Guide for Grants and Contracts (//grants.nih.gov/grants/guide/url_redirect.php?id=11164)</u>. All awards are subject to the terms and conditions, cost principles, and other considerations described in the <u>NIH Grants Policy Statement</u> (//grants.nih.gov/grants/guide/url_redirect.php?id=11120).

Authority and Regulations

Awards are made under the authorization of Sections 301 and 405 of the Public Health Service Act as amended (42 USC 241 and 284) and under Federal Regulations 42 CFR 63A and 2 CFR Part 200.

<u>Weekly TOC for this Announcement (/grants/guide/WeeklyIndex.cfm?11-15-24)</u> <u>NIH Funding Opportunities and Notices (/grants/guide/index.html)</u>



https://grants.nih.gov/grants/guide/pa-files/PA-25-168.html

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