



Request for Applications

Pilot Awards for HIV Research

RFA issued:	December 15, 2023
LOI survey due:	February 7, 2024
Pre-submission meeting:	February 12, 2024
Applications due:	March 20, 2024
Earliest start date:	May 1, 2024

Funding Opportunity Description

The Third Coast Center for AIDS Research (TC CFAR) solicits applications for Pilot Awards to begin in spring or summer 2024. TC CFAR pilot awards are intended for preliminary studies in HIV-related basic, clinical, social, behavioral, or implementation research that will lead to new grant submissions to the NIH for HIV research. The proposed project must **align** with NIH priorities for HIV research ([NOT-OD-20-018](#)). Review criteria value projects that are trans-disciplinary and that will be competitive for NIH HIV funding using pilot results. Proposals must outline a new project that is distinct from any currently funded research. Collaborations between HIV researchers and researchers in other (non-HIV) fields are encouraged. Please contact the Developmental Core leadership if there is need for identifying potential collaborators.

Funds Available and Project Timelines

- Up to \$60,000 in direct costs are allowed and smaller budgets may be awarded. Indirect costs will be determined at the time of award.
- Awards will be made from the Third Coast CFAR P30 grant and/or institutional commitments.
- Funding is contingent upon NIH support for the Third Coast CFAR, which is expected to renew in 2025.
- The maximum project period is one year. Proposals for shorter projects are encouraged. All projects must be completed by the end of April 2025.
- Documentation that the applicant has requested IRB or IACUC approval will be required with proposal. Similarly, applicants anticipating an exemption determination from an IRB or IACUC must provide documentation that the exemption has been requested as part of the proposal package. Full approvals or exemption determinations must be in place in order for an application to be prioritized for funding.

Eligibility

The Principal Investigator (PI) on the application must be a new investigator (i.e. never PI on an R01-equivalent NIH grant) or new to HIV research (i.e. never PI on R01-equivalent NIH grant for HIV). The PI must be a Third Coast CFAR faculty member, which means they have a PI-eligible appointment at Northwestern University, the University of Chicago, or Lurie Children's Hospital.

All investigators listed on an application must be a member of the Third Coast CFAR, either as a full faculty or affiliate member. Register for CFAR membership here: <http://www.thirdcoastcfar.org/membership>.

New investigators are required, and new to HIV investigators are strongly encouraged, to include an established HIV researcher as a mentor on the application. Investigators previously funded in this program may apply for a pilot award to continue with a second year of funding for an existing pilot project with written permission from the Developmental Core.

Administrative responsibilities for the pilot Principal Investigator's department/unit

The Third Coast CFAR functions as the sponsor for these pilot awards and will work with Northwestern University's Sponsored Research office to set up a funding mechanism for the pilot award PI. The award recipient is responsible for working with the research administration within their department/division/unit to manage this award. Management includes procurement, expense reports, deployment of unit personnel on this project, communication with other departments/units to assure proper deployment of personnel on this project, reconciliation of general ledger reports and expenditures, tracking of budget balances, and other activities in support of completion of project aims.

Project relevance to HIV

Proposals must **align** with the priorities as defined by the NIH Office of AIDS Research and described in [NOT-OD-20-018](#).

Examples of research ALIGNED with the priority areas are listed below. The list is not ranked and is not all inclusive.

- Reduce incidence of HIV/AIDS, including develop safe, effective, practical, and affordable HIV vaccines, microbicide and pre-exposure prophylaxis candidates and methods of delivery, especially those that improve adherence; and develop, test, and implement strategies to improve HIV testing and entry into prevention services.
- Research focused at fundamental scientific questions with a clear or credible link to HIV/AIDS to understand the mechanisms of HIV transmission and acquisition, virus/host cell interactions and pathogenesis, and the structure and dynamics of HIV proteins to prevent ART drug resistance; immune dysfunction and persistent inflammation; host microbiome and genetic determinants; and other fundamental issues that underpin the development of high priority HIV prevention, cure, co-morbidities, and treatment strategies.
- Next generation HIV therapies with better safety and ease of use including develop and test HIV treatments that are less toxic with fewer side effects and complications, longer acting, easier to take and adhere to than current regimens.
- Long-term treatment or prevention strategies for HIV-relevant coinfections and comorbid conditions across the lifespan.
- Effective socio-behavioral interventions to achieve uptake of HIV prevention and treatment strategies and reduce health disparities.
- Implementation research designed to ensure biomedical and other prevention and treatment strategies, are initiated as soon as possible, increased retention and engagement in treatment services, and maintenance of optimal prevention and treatment responses are achieved.
- Research toward a cure including development of novel approaches and strategies to study viral persistence, latency, reactivation, and eradication; identify and eliminate viral reservoirs that could lead toward a cure or long-term remission.
- Research training of the multidisciplinary workforce required to conduct High Priority HIV/AIDS or HIV/AIDS-related research.
- Research that includes people (or biological specimens from people) who with HIV, are HIV exposed, and/or are at elevated risk for HIV infection as part of a broader sample or as a

comparative cohort.

- Research that examines health and social issues, such as other infectious or non-infectious conditions and substance use or mental health disorders, clearly linked with HIV. (transmission/acquisition, pathogenesis, morbidity and mortality, stigma) in populations or settings with high HIV prevalence or incidence.
- Research that meaningfully includes HIV/AIDS (or SIV) outcomes/endpoints.
- Development of innovative technologies, such as sensitive assays, biomarkers, and imaging methods, coupled with cutting-edge studies of biology, virology, pharmacology, and immunology to advance durable and scalable prevention, treatment and cure in people with HIV.

Regulatory compliance

Studies involving human subjects may be subject to additional NIH review prior to initiating the study. Clinical trials, as [defined by the NIH](#), are not eligible for CFAR funding. Utilize [the NIH's decision tool](#) to confirm that your project is not considered a clinical trial. If the project or any project-related activities will occur outside of the US, additional NIH review will be required. NIH reviews may delay the project start date.

Review criteria

The primary criteria for evaluation of the application are scientific merit and the concomitant likelihood that the pilot project will lead to an HIV grant submission to NIH.

Reviewers will use a standardized scoring system and a modified set of criteria listed below.

- Alignment with NIH's priorities for HIV research. Does the work align with the priorities for HIV research as described in [NOT-OD-20-018](#)?
- Competitiveness for NIH AIDS funding: Is the pilot project targeted at development of an NIH grant proposal? Will completion of the pilot project increase the probability of obtaining AIDS funding from NIH?
- Transdisciplinary nature of the research: Proposals that successfully bring more than one scientific discipline to bear on research questions of interest are encouraged.

Additional review criteria are per standard NIH research project review:

- Significance: Does this study address an important problem? If the aims of the application are achieved, how will scientific knowledge be advanced? What will be the effect of these studies on the concepts or methods that drive this field?
- Innovation: Does the project employ novel concepts, approaches or methods? Are the aims original and innovative? Does the project challenge existing paradigms or develop new methodologies or technologies?
- Approach: Are the conceptual framework, design, methods, and analyses adequately developed, well integrated, and appropriate to the aims of the project? Does the applicant acknowledge potential problem areas and consider alternative tactics?
- Investigative team: Is the PI a new investigator or an established investigator new to HIV research? Is an appropriate plan in place to provide mentoring? Is an appropriate plan in place for collaborative work across disciplines and organizations?

Application and Submission Information

Letter of Intent (LOI) survey responses due February 7, 2024

LOI information will be collected via survey. Responses are required, but not binding.

https://is.gd/ThirdCoastCFAR_PilotApp

Requested information will include:

- Name, position, institution, contact information, and role on project for members of the research team
- Mentor: name, position, institution, contact information
- Planned title and draft or outline of the introduction, abstract, aims, and thumbnail sketch of the approach
- Identify the specific NIH HIV research priority bullet with which the project aligns
- Checklist to identify types of Third Coast CFAR resources that could be useful
- Checklist to identify types of regulatory approvals that will be needed

Additional sections for upload of final application sections are not required for the LOI.

Mandatory pre-submission review meeting on February 12, 2024

The Developmental Core will lead required pre-submission consultations on Monday, February 12, most likely between 1:30 and 4:00 pm. Applicants and their mentors are requested hold this time on their calendars until individual meetings can be scheduled, once the core has processed LOIs. The purpose of the pre-submission consultations is to: 1) review the applicant's responses to the LOI survey; 2) navigate the applicant to resources in the Third Coast CFAR and across the universities that could be incorporated into the project development; 3) assess alignment with NIH HIV research priorities; and 4) identify regulatory reviews that may be required.

Applications due March 20, 2024

The application is an abbreviated NIH R01-style format and NIH forms are used as indicated in the table below. Forms can be downloaded from <http://grants.nih.gov/grants/funding/phs398/phs398.html>. Applications are expected to use NIH formatting standards (single-spaced, 0.5 inch margin minimum, Arial, Helvetica, Palatino Linotype, or Georgia typeface in black in at least 11 point size).

The application submission link (https://is.gd/ThirdCoastCFAR_PilotApp) is the same as for the LOI survey. Use your "return code" to open your application that will contain all previously entered LOI information. Update information in the LOI survey portion of the application as required at the time of full application. At the end of the LOI sections are the sections for upload of your final application components. Click "submit" when all final components are loaded. Contact Justin Schmandt if you need your "return code". Applications are due by 11:59 p.m. on March 20, 2024.

Award announcement and project start dates

Awards are expected to be announced by early May. The earliest project start date is May 1, 2024. Applicants will be advised during the pre-submission meeting to address administrative requirements. The processes below must be initiated by the time of submission and must be fully in place for an application to be prioritized for funding:

- IRB review and approval
- IACUC review and approval
- Conflict of Interest disclosures and management

REQUIRED COMPONENTS FOR APPLICATION	FORMAT AND NOTES
LOI Survey information	Update if necessary
Department/Unit Research Administrator Provide name and contact information.	No form
Written Permission to Apply Required only for applicants who have previously received CFAR pilot funding and are requesting a second year of funding. A CFAR Developmental Core director can provide written permission (email sufficient).	No form
Introduction Required when submitting a revision of a previously unfunded project. Respond to critiques from the prior submission and explain changes that have been made to improve the proposal.	1 page limit No form
Project Summary /Abstract Serves as a succinct and accurate description of the proposed work when separated from the application.	Limited to 30 lines No form
Project Narrative Use plain language understandable by a general audience to describe how the work will contribute to knowledge that will enhance health.	3 sentence limit No form
Specific Aims State concisely the goals of the proposed research and summarize the expected outcome(s).	1 page limit No form
Research Strategy Similar to an NIH R01-style application, include the following sections: <ul style="list-style-type: none"> • Significance: Explain the importance of the problem, the scientific premise, and gaps in current knowledge. You may include preliminary data, if available (not required), in this section or the approach section. • Innovation: Explain how the work will shift current paradigms, or the use of novel technologies/methods, approaches, and theoretical concepts. • Approach: Describe the overall strategy to achieve the specific aims. Describe the experimental design and methods in sufficient detail to allow the reviewers to see how you will achieve robust and unbiased results. Discuss potential problems and alternative strategies. 	5 page limit No form
Regulatory Approvals Upload a screenshot that confirms any necessary approvals or exemption determinations from an IRB or IACUC have been requested. Final approvals or exemption determinations must be sent to the Developmental Core before an application will be prioritized for funding in mid-April.	No form

<p>Human Subjects Section</p> <p>Required only when the proposed project includes human subjects research. Upload a single Word document that describes plans to work with human participants / subjects. Refer to NIH guidance so that all questions are thoroughly addressed.</p>	<p>No limit Use CFAR form</p>
<p>Bibliography</p> <p>Include title and names of all authors. Follow same formatting and type size rules as for the research strategy.</p>	<p>No limit No form</p>
<p>Plans for future NIH proposal submission</p> <p>Explain how this pilot project will add value to plans for future NIH proposals, citing the specific RFA(s) or Program Announcement(s) and targeted date for submission. If the applicant has previously received pilot funding, provide information on any NIH grant submissions to date, and explain how additional funding will support a successful NIH grant submission in the future.</p>	<p>1 page limit No form</p>

<p>Detailed Budget for Direct Costs</p> <ul style="list-style-type: none"> • Allowable expenses include salary and fringe benefits for the research team, supplies, participant incentives, assays, data analysis, and core services. Identify all services to be purchased from core facilities and provide the name of the facility. • Applicants are encouraged to utilize CFAR core services. Contact core directors or Justin Schmandt to confirm available services and generate an estimate of costs. • Salary for the mentor should generally not be included unless they are doing work on the project. • Investigators on K-awards may be restricted from accepting salary. • Training and tuition cannot be supported. Salary may be requested for a graduate student or postdoctoral scientist with a clear justification of the work they will do on the project and who do not have salary supported on a training grant. • Travel and equipment are not allowed unless essential for execution of the research. • Publication costs are not permitted. • Provide a separate budget for each institution. • Sites other than NU should list F&A costs. These costs do not count against the \$60,000 limit. • Do not include NU indirect or F&A costs for the overall project. These will be calculated at the time of funding. • When feasible, use a service agreement to support partners that are not conducting human subjects research for the project. Contact Justin Schmandt to discuss this option. • In the budget workbook, provide a separate budget sheet for each institution 	<p>Use CFAR form</p>
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<p>Budget Justification</p> <ul style="list-style-type: none"> Describe and justify each line item on the budget. Identify any core facilities that will be used and how costs were calculated. Provide a separate budget justification for each institution that will receive funds. 	<p>No limit Use CFAR form</p>
<p>Biosketches</p> <p>Provide for PI or Co-PIs, Mentor, and Co-Investigators</p>	<p>Use NIH template</p>
<p>Mentorship Plan and Letter of Support</p> <p>New investigators must have a mentor who is an established PI (i.e., R01 or equivalent funding from NIH) in HIV research and who can provide the applicant with advice on their pilot project, subsequent applications to NIH, and can help facilitate connections to CFAR resources. An HIV mentor is strongly suggested for established investigators new to HIV. The letter from the mentor should describe the relationship between the mentor-mentee and their plan for this project, including frequency and mode of communication, and how progress toward a subsequent NIH application will be monitored. Primary mentors on CFAR pilot awards should be based at NU or UC; secondary mentors can be from other organizations outside the TC CFAR. Investigators may contact the CFAR for assistance in identifying a mentor.</p>	<p>No form</p>
<p>Other Letters of Support</p> <p>Other letters of support may be included. They are strongly suggested when the applicant plans to use a resource, service, data, or specimens that are not widely available. Proposals that rely on participation from a community partner are required to include an authorized letter confirming the organization's support.</p>	<p>No form</p>
<p>Appendices</p> <p>Appendices are permitted but not required. Applicants may include blank data collection forms, lists of interview questions, or consent forms in their submission. Note that reviewers are not required to read appendices; all information required for the peer review process must be contained within designated sections of the pilot application.</p>	<p>No limit No form</p>

The application submission link is the same as for the LOI survey. Use your "return code" to open your application, which will contain all previously entered LOI information. Update information in the LOI survey portion of the application as needed. After the pre-review, additional fields will be displayed where you will add your proposal components. Contact Justin Schmandt if you need your "return code".

Applications must be time-stamped by REDCap by 11:59 p.m. March 20, 2024.

Obligations of the Pilot Award Recipient PI

1. Investigators awarded funding will be required to provide an interim report on the progress of their study and a final report detailing the outcome of their project. Specific due dates for reports will be provided in the Notice of Award and are chosen to support preparation of Third Coast CFAR reports to NIH and advisory boards.
2. In order to evaluate the long-term outcomes of the program, and in accordance with NIH

reporting requirements for the Third Coast CFAR, brief, non-narrative annual reports will be solicited from the PI for five years following the completion of their project indicating:

- a. The number of subsequent grant applications
 - b. The funding outcome of these applications
 - c. Any publications or presentations that may have been based on the pilot grant
3. Awardees are expected to present their work at CFAR events, upon invitation.
 4. Awardees must agree to credit the Third Coast Center for AIDS Research in any publication or applications that result from awards. For example: "This [*insert: abstract /publication/ presentation/ grant proposal*] was (partially) supported by a pilot award from the Third Coast Center for AIDS Research (CFAR), an NIH-funded center (P30AI117943), with co-funding from the following Institutes and Centers: NICHD, NIA, NIDCR, NINR, NHLBI, NICHD, NIDA, NIDDK, NIMHD, NIMH, NCI, NIAID, FIC, and OAR. The content is solely the responsibility of the authors and does not necessarily represent the official views of the National Institutes of Health."
 5. All publications that benefit from support provided by the Third Coast CFAR must comply with the NIH Public Access Policy.
 6. Awardees must provide, and agree to allow, information about research awarded under this program, subsequent awards, and publications to be posted on the Third Coast CFAR website.
 7. Management of the award will be the responsibility of the PI's department or unit.

Additional Information and Questions

It is the mission of the Developmental Core of the Third Coast Center for AIDS Research to provide strong support for new investigators and established investigators new to HIV research. Please contact us with questions or requests for assistance at any point in the application process. Requests for additional information and questions may be directed to:

Jenny Trinitapoli, PhD
Developmental Core Director
Professor of Sociology, University of Chicago
jennytrini@uchicago.edu

Kathryn Macapagal, PhD
Developmental Core Co-Director
Associate Professor of Medical Social Sciences, Northwestern University
kathryn.macapagal@northwestern.edu

Elena Martinelli, PhD
Developmental Core Co-Director
Professor of Medicine (Infectious Diseases), Northwestern University
elenamartinelli@northwestern.edu

Justin Schmandt, MPH
Associate Director, Third Coast CFAR
justin.schmandt@northwestern.edu