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

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Webinar starts at 1:00 PM EDT



# **Webinar Tips**

Participants will be in <u>Listening Mode</u> and will not be able to ask questions verbally.

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

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

These slides and a recording of today's webinar will be available on the NIMHD website: <a href="http://www.nimhd.nih.gov/">http://www.nimhd.nih.gov/</a>.



# **Agenda**

- RFA background, objectives, and expectations
- II. Peer review of applications
- III. Timeline for submission, review, and selection of applications
- IV. Participant questions



# Part I: RFA Background, Objectives, and Expectations



### **Key Definitions**

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

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

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

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



# **Background**

- Despite increasing recognition of the role that SRD has on health and health disparities
  - Health research has largely focused on interpersonal racism and discrimination
  - SRD beyond residential segregation has not been routinely examined as a determinant of health
  - Health interventions have not addressed SRD as an intervention target
- Need for health research and interventions to incorporate constructs and measurement of SRD across multiple levels of influence
  - Organizational/institutional
  - Neighborhood/community
  - Societal



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

#### Expectations for all projects:

- Address SRD in one or more populations with health disparities
- Provide a justification for why the SRD to be studied constitutes SRD
- Provide a conceptual model identifying hypothesized pathways between SRD and health outcomes
- Collect data on SRD beyond individual self-reported perceptions and experiences
- Involve collaborations with relevant organizations or stakeholders



**Limited Resources** and Opportunities











**Populations** with Health **Disparities** 



**Structural Racism** and Discrimination



Health **Outcomes** 







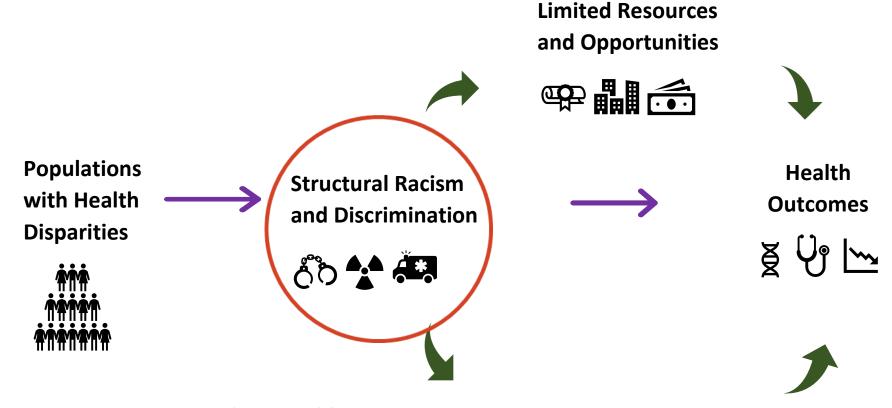












- SRD constructs used as variables to include in analyses
- Direct assessment of SRD, not just



#### **Observational Studies**

#### Projects may

- examine the impact of SRD on health, and/or
- evaluate the impact that existing efforts to address SRD (e.g., laws, policies, programs, organizational practices and procedures) have on health
- involve primary data collection and/or secondary data analysis
- use quantitative or mixed methods approaches

Must be focused on US populations



#### Intervention Studies

#### Intervention projects may

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

#### Intervention projects should

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



# **Specific Areas of Research Interest**

- Topics/priorities of participating NIH Institutes/Centers (ICs) listed in RFA
  - Some ICs will only support intervention studies
  - Some ICs have different topic areas of interest for observational or intervention studies
- Individual ICs will be responsible for making funding decisions
  - It is critical that your project falls within the mission and priorities of at least one Institute or Center
    - Participating Offices may provide co-funding but will not be assigned applications
- Reaching out to one or more scientific contacts listed in the RFA is highly recommended!!



# Part II: Peer Review of Applications





#### **RFA Peer Review**

Applications will be assessed for completeness by the Center for Scientific review (CSR).

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

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



#### **Preparations for Peer Review**

https://grants.nih.gov/grants/guide/rfa-files/RFA-MD-21-004.html

#### Administrative Review of Applications

RFA requirements

#### Scientific Expertise

- as defined in FOA
- collective content of the applications

#### Attention to Conflict of Interest

#### Diverse representation

- gender/ lifespan
- demographics
- geography



#### **Peer Review Criteria**

#### Reviewers evaluate each applicant's potential to succeed Overall Core ( Preliminary score)

- Significance
- Investigators
- Innovation
- Approach
- Environment



#### **FOA Specific Characteristics**

- Program goals
- Mechanism specific characteristics
- Review Criteria: Specific to this FOA queries



#### **Additional Review Criteria**

(included in the determination of the overall score)

#### **Human subjects**

Guidelines for the Review of Human Subjects

Protection of Human Subjects against research risk Five criteria

Inclusion

Guidelines for the Review of Inclusion in Clinical Research

Women

**Minorities** 

Lifespan



#### **Review Process**

- Pre-Meeting Written Opinions
- Overall Impact
- Resume



#### **Peer Review Meeting**

Some applications may be "streamlined" -- not discussed (ND)

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

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

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

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

Do not contact the members of the review panel!



### **Videos on Peer Review Topics**

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

https://era.nih.gov/era\_training/era\_videos.cfm

#### **Resources For Using ERA Commons**

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

#### **Problems with Submission Processing**

Always contact ERA Service Desk.

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

# In Doubt

# Phone NIH

Peer Review, Program and Grant
 Administration Contacts are included on the last slide of this presentation and in the RFA.

#### Part III:

# Timeline for Submission, Review, and Selection of Applications



#### **Timeline**

Letter of Intent Due Date: July 20, 2021

Application Due Date: August 24, 2021

Peer Review Meeting: November 2021

Council Review: January 2022

Earliest Start Date: April 2022





#### **NIMHD Contacts**

#### **Program**

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#### **Grants Management**

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See other scientific/research and financial/grants management contacts in the RFA.



# Part IV: Participant Questions

Send questions via webinar chat.

