Webinar Questions & Answers

Q. Are new applicants who have not had prior NIH funding before encouraged to apply?
   A. Yes, we welcome applications from new and early stage investigators. However, if you are new to the NIH application process, we strongly encourage you to consider working with someone who has experience with the NIH grants process before, possibly a colleague or an expert at your institution. Additionally, we encourage you to speak with the program director, Richard Moser (moserr@mail.nih.gov), who can help you with the scientific aspects of your application. If you have administrative concerns or questions, please reach out to Carol Perry (perryc@mail.nih.gov).

Q. Are these applications being reviewed by a special emphasis panel?
   A. Yes. Review falls under the purview of the Center for Scientific Review (CSR) at NIH. Their goal will be to convene a panel with all the relevant expertise necessary for the review panel. The program directors do their best to advise CSR on the types of disciplines to include on the panel. Because this announcement focuses on integrative data analysis as it relates to cancer, this panel may have expertise in cancer-related behavioral research, behavioral methods, general methods, and Geographic Information Systems methods. Investigators can help CSR, and us, by submitting letters of intent, and by writing cover letters that specify the expertise you think necessary to evaluate your proposal.

Q. Why are the standard NIH receipt dates not included in the application?
   A. Because these applications are going to a special review panel rather than a standing study section, we have our own set of receipt dates for these program announcements. The announcements are limited to two cycles per year for three years.

Q. Can an application be specifically methods-focused just on the methods itself, or must the application have a balance between methods and outcomes?
   A. The application should not be focused solely on the methods themselves. You must include a cancer control research question that can only be answered by merging or linking multiple sets of data. The application will likely include methods (i.e., a new or novel approach to merging or linking data), but the methods must be in support of answering a research question.

Q. Must the data sets use validated instruments?
   A. While the term “validated” could mean any number of things, we would expect that the data sets you use contain scientifically sound instruments, that is, psychometrically tested (e.g., valid and reliable). It is possible, however, that some of the data sources (e.g., social media) may not lend themselves to traditional validation assessments. In that case, and
because it is secondary data analysis, you will need to specify from the data source, the
sampling scheme, how they were collected, and how the instruments were validated, to
allow the reviewers to determine the research project’s scientific rigor.

Q. **Is it preferred to conduct longitudinal studies or cross-sectional studies that are linked?**
A. No preference. The type of studies you use should be dictated by the research question you are trying to answer.

Q. **How big would the data set need to be? Would small data sets less than 500 be considered?**
A. There are no restrictions on the number of subjects needed for a robust data set; it would depend on the question you are trying to answer and whether you have enough sample size to adequately analyze. You may need to demonstrate through a power analysis that you have enough power to detect differences in the groups you plan to study or otherwise provide a rationale for the data sets you are using.

Q. **Does the SEER-CAHPS data have variables on cancer stage and cancer treatment types?**
A. Cancer stage is available through SEER, and there are some cancer treatment types through Medicare claims. These data resources require application and approval to obtain data. Please consult the websites below for more information.

SEER-Medicare
[healthcaredelivery.cancer.gov/seermedicare](http://healthcaredelivery.cancer.gov/seermedicare)

SEER-Medical Health Outcomes Survey (SEER-MHOS)

SEER-Consumer Assessment of Healthcare Providers and Systems (SEER-CAHPS)
[healthcaredelivery.cancer.gov/seer-cahps/](http://healthcaredelivery.cancer.gov/seer-cahps/)

Q. **Since you have cast a broad net to define behavior, would healthcare-seeking behavior (e.g., cancer screening) fit in your definition of behavior?**
A. Yes, screening is an observable health behavior that would be considered responsive to this announcement. One can assess screening behavior and utilization through SEER-CAHPS and SEER-Medicare. There can be limitations to assessment of screening using these claims, however, so please see the website for more information.

Q. **Is the merge necessary at the individual level such as between SEER and Medicare, or could the link be time, for example, day-to-day social media data and annual health survey data?**
A. No, the data merge does not have to be at an individual level. What is most important is that your methods fit the question you are trying to answer.
Q. You mentioned the SEER-CAHPS-linked database. Is this linkage enough to be responsive to the funding opportunity announcement, or would a third database need to be merged?
A. Even though they were already linked together, because SEER-CAHPS pulls data from multiple resources, it would be considered responsive to this funding opportunity announcement.

Q. You mentioned it is all right to utilize previously collected data by colleagues. What if the investigators also contributed to the data collection in the past? Should the previous data be completely new to the applicants?
A. The data do not need to be new to the applicant. You can repurpose data that have been used in a previous grant, but you need to use the data to answer a novel research question.

Q. Can you look at just one behavior, for example, breast cancer screening, if it is a multilevel determinant, or do you have to examine multiple risk behaviors?
A. No, it is not necessary to study multiple risk behaviors. Your focus may be on the multi-variable aspects of breast cancer screening, for example, where you are using different types of data to better understand a screening outcome.

Q. What if you had behavioral data on subjects and related specimens that have not been analyzed yet? Would analyzing the specimens and linking them to the survey data work?
A. Yes, this would be responsive to the funding opportunity announcement. It is a good example of enhancing existing data by linking them to new data.

Q. Would cost-effectiveness analyses be an acceptable aim?
A. If there were no other behavioral measures in your model, this alone would not be an acceptable aim. To be responsive to the funding announcement, your analyses must include at least one source of behavioral data.

Q. Is there a preference or stipulation for proposals that study national, state, or regional populations and data sets?
A. No.

Q. Can you use state or local databases?
A. Yes

Contacts

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