Webinar on Funding for U.S. Tobacco Control Policies to Reduce Health Disparities

August 8, 2017

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Using WebEx and Webinar Logistics

- Submit questions at any time during the presentation. Type into the Q&A feature on the right of the interface and press “submit”.
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Agenda

- Background
- Funding Opportunity Announcement (FOA) Details
- Resources
- Questions
  - Questions about specific aims or individual grant applications will not be addressed
Background

U.S. Tobacco Control Policies to Reduce Health Disparities
The **Behavioral Research Program (BRP)** initiates, supports, and evaluates a comprehensive program of research including basic behavioral and psychological science as well as the development, testing, and dissemination of interventions in cancer control areas such as tobacco use, diet and energy balance, and sun protection.

[link](cancercontrol.cancer.gov/brp)
How We Fund Grants

- Although most of our portfolio consists of investigator-initiated (unsolicited) grants, BRP also supports grant applications in specific areas of interest:
  - Requests for Applications (RFA)
    - Identifies the specific receipt date(s), the estimated amount of funds earmarked for the initiative, the number of awards likely to be funded, and any specific criteria for scientific peer review; applications received in response to a particular RFA are reviewed by an Institute’s Scientific Review Group
  - Program Announcements (PA)
    - Most PA applications are submitted with a standing receipt date and are reviewed with all other applications received at that time using standard peer-review processes
  - Program Announcements with Review (PAR)
    - Program announcements with special receipt, referral, and/or review considerations
    - For more information: cancer.gov/grants-training/grants-process/grants-process.pdf
Grant Mechanisms – R01 and R21

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<th>NIH Research Project Grant (R01)</th>
<th>NIH Exploratory/Developmental Grant (R21)</th>
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<td>- Used to support a discrete, specified, and circumscribed research project</td>
<td>- Encourages new, exploratory, and developmental research projects by providing support for early stages of project development</td>
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<td>- NIH's most commonly used grant program</td>
<td>- Sometimes used for pilot and feasibility studies</td>
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<td>- No specific dollar limit unless specified in Funding Opportunity Announcement (FOA)</td>
<td>- Limited to up to two years of funding</td>
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<td>- Advance permission required for $500K or more (direct costs) in any year</td>
<td>- Combined budget for direct costs for the two-year project period usually may not exceed $275,000</td>
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<td>- Generally awarded for 3-5 years</td>
<td>- No preliminary studies are required</td>
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Funding Opportunity Announcement Details

U.S. Tobacco Control Policies to Reduce Health Disparities
Funding Announcements
U.S. Tobacco Control Policies to Reduce Health Disparities

Released: May 26, 2017

PAR-17-217 (R01)


PAR-17-218 (R21)

Purpose: Support observational or intervention research focused on reducing health disparities in tobacco use in the United States. Specifically, this FOA is intended to stimulate scientific inquiry focused on innovative tobacco control policies. The long-term goal is to reduce disparities in health outcomes thereby reducing the excess disease burden of tobacco use within these groups.

Goals of this FOA are:

- To understand how to improve the effectiveness of existing tobacco control policy strategies to reduce health disparities in tobacco use, and
- To study new policy approaches to reducing health disparities in tobacco use.
Goal of Funding Announcement

Example Areas of Research focus:

- Protecting nonsmokers from secondhand smoke (SHS) exposure,
- Insurance coverage for tobacco dependence treatment, and
- Promising public & private tobacco control policy approaches.
Examples of Vulnerable Populations with Demonstrated Tobacco Health Disparities

- Racial or ethnic groups living in low-resource communities,
- Public housing residents,
- People exposed to SHS at work or home,
- People with depression & comorbid psychiatric conditions or physical disabilities, and
- Patients of Federally Qualified Health Centers.
Percentage of non-smoking children aged 3-11 years with serum cotinine levels 0.05-10 ng/mL, by race/ethnicity – NHANES, US 1999-2012

https://www.cdc.gov/mmwr/preview/mmwrhtml/mm6404a7.htm?s_cid=mm6404a7_w
Medicaid Coverage for Tobacco Cessation Counseling and Medications, 2014-2015

Source: http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6442a3.htm
2014 data was not available for South Dakota.
2015 data was not available for Washington D.C.

Counts may not sum to 51 if information was not available for all states.
In the last month….

New Jersey raises smoking age to 21
By Evan Simko-Bednarzki, CNN
Updated 1:22 PM ET, Sat July 22, 2017
Selling or giving cigarettes or other tobacco products to anyone younger than 21 will be against the law in New Jersey starting November 1.

Oakland, California Bans Sale of Flavored Tobacco
Oakland has become the latest city to ban the sale of flavored tobacco after officials in San Francisco took a similar step.
July 19, 2017, at 1:31 p.m.
Example Research Questions

- How do health insurance tobacco cessation coverage policies, including Medicaid policies, influence access to and utilization of evidence-based tobacco dependence treatments by disparate populations?

- What communication strategies and messages are most effective for promoting tobacco use prevention and cessation within the context of emerging tobacco policy initiatives (e.g., smokefree public housing, raising minimum age for sale of tobacco). How can these messages be best delivered and tailored to be sensitive to local contexts and challenges with vulnerable populations?
More Research Questions

- What theoretical approaches can help guide the development and testing of novel, multi-level interventions (e.g., clinical, policy, community) to reduce the use of tobacco products in vulnerable populations?
- How do concurrent patterns of marijuana and tobacco use, considering their temporal ordering and contingency and types of tobacco products, influence patterns of tobacco use with vulnerable populations? How do state policy changes and variability in marijuana legalization status affect tobacco use?
Dissemination and Implementation

- Dissemination and implementation of research are enhanced when needs, perspectives, and goals of the end-users are factored in from the beginning.

- All applications must include an overall strategy that builds upon rigorous dissemination and implementation science.
Innovation (Specific to this FOA)

Does the overall strategy employ innovative approaches that build upon rigorous dissemination and implementation science?

Approach (Specific to this FOA)

Investigators should include a well-designed plan for proactively disseminating and implementing research findings including:

- A specific plan for identifying and engaging critical community partners in research,
- Clearly described roles and responsibilities of key partners, and
- Plans regarding the nature and extent of future collaborations.
Read the FOAs Very Carefully!

- **Open Date (Earliest Submission Date):** September 11, 2017
- **Application Due Dates:** October 11, 2017, June 13, 2018; October 11, 2018; June 13, 2019; October 11, 2019; June 15, 2020
- **Letter of Intent Due Date:** 30 days prior to the application due date
- Earliest Start Date: July 2018; April 2019; July 2019; April 2020; July 2020, April 2021
- **Expiration Date:** June 16, 2020
- Start the process early! Allow time for registration in the System for Award Management, eRA Commons, and Grants.gov
Applications will be evaluated by reviewers with relevant expertise in health disparities and tobacco control.

R01’s maximum project period is 5 years, which require preliminary studies.

R21’s are 2-year grants, which are considered exploratory and do not require preliminary studies.

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

Not intended to support studies of biological mechanisms or disease processes.

Grants with direct costs ≥ $500,000 in any year require Program approval for submission
  Submit materials to Program Director at least 8 weeks prior to receipt.

Applications related to health economics are encouraged to consult NOT-OD-16-025  
Questions?
U.S. Tobacco Control Policies to Reduce Health Disparities

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Thank you!

• To receive information about future FOAs and other updates, you may sign up for the NCI’s Behavioral Research Program’s Listserv: cancercontrol.cancer.gov/brpsubscribe

• Join us on Twitter: @NCIBehaviors

• Today’s webinar and list of Q&As (both leading up to and following the webinar) will be posted online: cancercontrol.cancer.gov/brpwebinars