Q1: We are currently working with Latino immigrants in southern Florida. Many times our grants are criticized for focusing only on that area, a criticism we find unfair since the area is unique and highly in need. Are we going to be penalized for proposing research that focuses on southern Florida?

A1: Studies that focus on geographic specificity, particularly in areas that include populations that experience tobacco-related health disparities, are encouraged under these FOAs. In fact, any population with a documented tobacco-related health disparity would be an appropriate focus for these FOAs. An important consideration would be to demonstrate the ability to recruit a population that is large enough to ensure that adequate power would be achieved with a study of the specific population. Latino immigrants, including native Spanish speakers, farmworkers, refugees, and other Hispanic people in South Florida could be appropriate group(s) with which to develop an intervention. Of course, as with all applications responding to these PARs, it is important to demonstrate well-organized community engagement with appropriate partners and to present a thorough dissemination and implementation plan that identifies how investigators would work with this population to ensure their active engagement from the initial phases of the research design through implementation.

Q2: What is the level of interest with electronic nicotine delivery systems (ENDS)?

A2: Policy research pertaining to the use of ENDS products and heated tobacco products would be responsive to these PARs. As identified in the PARs, it is important to ensure that any proposed study design includes the key elements of community engagement and dissemination and implementation of research findings, and that the study builds on a clearly identified plan to address appropriate elements of health equity, or an intervention that improves health equity among priority populations.

Also, note that there are other existing FOAs and NOSIs that directly address the topic of ENDS research. These opportunities can be found at https://cancercontrol.cancer.gov/brp/tcrb/electronic-nicotine-delivery-systems.

Q3: Are postdocs eligible to apply for the R21 grant?

A3: Yes, post-doctoral fellows are eligible to apply to these PARs. For additional
Q4: Is there any special consideration in the review process given to Early-Stage Investigators (ESI) or first time R01 investigators?

A4: We welcome applications from new and early-stage investigators. Find more information about new- and early-stage investigators. Investigators who are new to the NIH application process may want to consider working with a team of people that has experience with the NIH grants process for mentoring and guidance. Peer reviewers consider an ESI’s potential for achievement and weigh your academic and research background heavily. Reviewers may expect new R01 investigators to have fewer preliminary data and publications than more established researchers do. New and early-stage investigator applications are typically sorted separately from established investigators at the review meeting.

Q5: Are interventions to make flavoring (menthol) bans more effective in line with this program? Or is looking at effects of flavoring bans on equity more appropriate?

A5: Research studies that address topics of policies related to flavor bans, including menthol, and how they may be effectively implemented or tailored to specific high-risk populations would likely be responsive to these FOAs. The emphasis of this research initiative is on tobacco control policies to promote health equity, so proposed research studies should develop research questions that aim to answer questions regarding how tobacco prevention and control policies might promote health equity or reduce tobacco-related health disparities. Applicants are encouraged to communicate with the scientific contacts listed in the FOAs to determine if specific proposals are within the scope of these PARs.

Q6: One of the disparity populations is people residing in rural areas. What do you consider as rurality? Is a population involving schools and colleges acceptable under these FOAs?

A6: There are many different definitions of rural, for example the U.S. Department of Agriculture (USDA) Economic Research Service (ERS) Rural-Urban Continuum Codes (RUCC) and Rural-Urban Commuting Area (RUCA) codes. More information can be found at these sites:
https://www.ers.usda.gov/topics/rural-economy-population/rural-classifications

While nonmetro is not always synonymous with rural, the codes provide some sense of population density for each nonmetro area. The nonmetro designations are often used
to indicate rural: RUCC 4-9 and RUCA 4-10. There are also Frontier and Remote (FAR) areas where level 4 is considered to be rural.

The U.S. Census Bureau provides another definition. If you wish to use another definition of rurality, you are encouraged to communicate with the scientific contacts listed in the FOAs.

Yes, studies that address populations of students, regardless of age, may be responsive to these FOAs. However, all the regular criteria of responsiveness to the funding opportunity still apply. The proposed study should also address policies related to tobacco prevention and control and health equity.

Q7: Do you have in mind the specific number of grants that you intend to fund?

A7: No. There is no specific number of grants that will be awarded under these PARs. Funding decisions will depend primarily on the score applications earn in peer review.

Q8: Is there interest in secondary analysis of existing datasets or is primary data collection preferred?

A8: Under some circumstances, secondary data analysis might be responsive to the FOAs; however, primary data collection is generally preferred. Given the emphasis of this initiative on community engagement, dissemination and implementation of findings, and policies that promote health equity, a study based solely on secondary data analysis may have difficulty convincing peer reviewers that such a study is competitive for this initiative. Applicants are encouraged to communicate with the scientific contacts listed in the FOAs to discuss study design in greater depth.

Q9: Can you repeat the comment about COVID contingency plans?

A9: Contingency plans will not be considered during the peer review process; however, if needed, COVID-19 contingency plans will be requested and carefully considered by NIH staff before any funding decisions are made. Applicants should consult the following web sites for more information:

Q10: The RFA says “the purpose of this Funding Opportunity Announcement (FOA) is to support observational or intervention research focused on reducing cancer health disparities in tobacco use in the United States. Non-domestic (non-U.S.) Entities (Foreign Institutions) are not eligible to apply.” With this information, I would like to know if the research is required to be exclusively done in the USA only or the primary applicant should be from the USA and the other collaborators can be from LMIC.

A10: Under these FOAs, the applicant organization and performance sites should be
located in the United States since the intention of the research is to focus on promoting health equity in tobacco control policies in the United States. Applicants are encouraged to communicate with the scientific contacts listed in the FOAs to determine if a particular international collaboration would be responsive to these opportunities.

Q11: What is the correlation of high rates of smokers in African Americans and their low-income status?

A11: This question is not clear. The questioner might reframe the question and follow up with NCI program staff if appropriate.

Q12: Are policies that are under FDA regulatory authority deemed relevant to this RFA (warning labels, for instance), or is the focus on state policies?

A12: Yes, depending on the specific policy, many issues within the authority of FDA’s Center for Tobacco Products might be responsive to these FOAs, including research studies on health warning labels. Research studies that would inform policymaking at the state and local levels would be especially responsive to these FOAs, but the initiative is not limited in that regard. It is important that an applicant propose a study that responds to the intent of these FOAs and focuses on research that may help promote health equity across all population groups and reduce tobacco-related health disparities. All the previously mentioned goals of engaging community partners with a strong emphasis on dissemination and implementation of research findings also apply. Applicants are encouraged to communicate with the scientific contacts listed in the FOAs to determine if specific proposals are within the scope of these PARs.

Q13: How can I be sure if my study meets the definition of a clinical trial?

A13: Please visit the following website for tools and resources that will help you determine if your study meets NIH’s definition of a clinical trial: https://grants.nih.gov/policy/clinicaltrials/definition.htm
Q14: Who should I contact with other questions or to discuss my specific study idea?

A14: Please contact Dr. Bob Vollinger, the NCI Scientific Program Contact for these FOA’s, with additional questions, including questions specific to your proposed study. Bob.Vollinger@nih.gov or 240-276-6919.

Listed below are the other scientific contacts.

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