## **Weekly Funding Opportunities**

June 7, 2017

## FACULTY RESEARCH OPPORTUNITIES

CDC Undergraduate Public Health Scholars Program (CUPS): A Public Health Experience to Expose Undergraduate and Graduate Students to Minority Health, Public Health and Health Professions - CDC seeks to fund organizations with the ability to reach undergraduate and graduate students, including sexual and gender, people with disabilities, low socioeconomic status (SES) and those from underrepresented racial and ethnic minority populations. The ultimate goal is to increase the diversity of the public health workforce, improve the representation of underrepresented populations in public health, and increase the quality of public health services nationally. **Application Due Date: June 19, 2017.** <u>https://www.grants.gov/web/grants/view-opportunity.html?oppId=293272</u>

**Socioeconomic Disparities in Health and Mortality at Older Ages (R01)** - The purpose of this funding opportunity announcement (FOA) is to support studies that identify mechanisms, explanations, and modifiable risk factors underlying recent trends of growing inequalities in morbidity and mortality by income, education, and geographic location at older ages in the United States. Application Due Date(s): October 20, 2017. <u>http://grants.nih.gov/grants/guide/rfa-files/RFA-AG-18-011.html</u>

**DOD Peer Reviewed Medical Clinical Trial Award** -The PRMRP Clinical Trial Award supports the rapid implementation of clinical trials with the potential to have a significant impact on a disease or condition addressed in at least one of the Congressionally directed FY17 PRMRP Topic Areas. Clinical trials may be designed to evaluate promising new products, pharmacologic agents (drugs or biologics), devices, clinical guidance, and/or emerging approaches and technologies. Proposed projects may range from small proof-of-concept trials (e.g., pilot, first in human, Phase 0) to demonstrate feasibility or inform the design of more advanced trials, through large-scale trials to determine efficacy in relevant patient populations. All studies must be responsive to the healthcare needs of the military Service members, Veterans, and/or beneficiaries; however, the use of military or Veteran populations is not required. Companion Funding Opportunities include <u>DoD Peer Reviewed Medical Focused Program Award</u>, <u>DoD Peer Reviewed Medical Discovery Award</u>, <u>DoD Peer Reviewed Medical Investigator-Initiated Research</u> Award, and <u>DoD Peer Reviewed Medical Technology/Therapeutic Development Award</u>. **Application Due Date: October 26, 2017.** <u>https://www.grants.gov/web/grants/view-opportunity.html?oppld=294147</u>

**HRSA Collaborative Improvement and Innovation Network on Infant Mortality (IM CollN)** - The infant mortality rate (IMR) is a widely used indicator of the nation's health. In 2012, the United States ranked 25th among 29 industrialized nations, with an overall IMR of 5.98/1,000 live births.1 Most notable, the IMR for infants born to non-Hispanic black mothers was 11.19/1,000, more than double the non-Hispanic white IMR of 5.04/1,000.2 State public health departments lead infant mortality reduction efforts within their states with support of the Title V Maternal and Child Health Services Block Grant Program.3 At the local level, Healthy Start grants are provided to communities with high annual rates of infant mortality (i.e., at least 1½ times the U.S. national average) and high rates for other adverse perinatal outcomes (e.g., low birthweight, preterm birth, maternal morbidity and mortality) in order to address the needs of high-risk women and their families before, during, and after pregnancy. To advance the mission of Healthy Start and contribute to state infant mortality reduction efforts, this

announcement solicits applications for the Collaborative Improvement and Innovation Network on Infant Mortality (IM CollN). **Application Due Date: July 17, 2017.** <u>https://www.grants.gov/web/grants/view-opportunity.html?oppId=290904</u>