NIH HEAL INITIATIVE

Preventing Opioid Misuse and Co-Occurring Conditions by Intervening on Social Determinants (NIH RFA-DA-22-036) Pre-Application Technical Assistance Webinar

Helping to End Addiction Long-term Moderated by Drs. Amy Goldstein, Aria Crump and Barbara Oudekerk, NIDA

NIH HEAL Initiative and Helping to End Addiction Long-term are service marks of the U.S. Department of Health and Human Services.

Welcome to the Webinar!

- Welcome to the Pre-application TA webinar for <u>RFA-DA-22-036</u>: Preventing Opioid Misuse and Co-Occurring Conditions by Intervening on Social Determinants.
- Webinar attendees are muted. Attendees may submit questions at any time through the Zoom Webinar Q&A feature.
- Questions that are not answered live will be answered through a Frequently Asked Questions document that will be posted on the <u>HEAL Prevention website</u> after the session.
- The webinar recording, slides, and FAQs document will be available approximately one week following the presentation.
- You are encouraged to email RFA contacts for consultation regarding your proposal (see Section VII of the RFA).



Pre-application TA Webinar Agenda

- Webinar Panelists; Funding Opportunity Participating Organizations
- Focus on Social Determinants
- RFA Programmatic Goals and Description
- Application Information and Key Dates
- Reminders for All Applicants
- Peer Review Process and Review Criteria
- Q&A Session



Webinar Panelists

Amy Goldstein, Ph.D. Chief, Prevention Research Branch National Institute on Drug Abuse HEAL Treatment and Prevention Workgroup email: <u>amy.goldstein@nih.gov</u>	Eve Reider, Ph.D. Associate Director for Prevention Research Treatment and Prevention Intervention Research Branch National Institute of Mental Health email: <u>ereider@mail.nih.gov</u>	
Aria Crump, Sc.D. Prevention Research Branch National Institute on Drug Abuse Contact PO, NIDA, Health Social Determinants RFA email: aria.crump@nih.gov	Devon Oskvig, Ph.D. Program Director National Institute on Aging email: <u>devon.oskvig@nih.gov</u>	
Barbara Oudekerk, Ph.D. Social and Behavioral Sciences Administrator Prevention Research Branch National Institute on Drug Abuse email: <u>barbara.oudekerk@nih.gov</u>	Sheila Pirooznia, Ph.D. Scientific Review Officer National Institute on Drug Abuse email: sheila.pirooznia@nih.gov	

RFA-DA-22-036: Participating Institutes and Offices

Institutes



National Institute on Drug Abuse (NIDA)

National Institute of Mental Health (NIMH)

National Institute on Aging (NIA)

Office of Behavioral and Social Sciences Research (OBSSR)

Office of Disease Prevention (ODP)



HEAL Prevention Initiative (HPI) Strategic Areas



For more information on the HEAL Prevention Initiative, see https://heal.nih.gov/research/new-strategies/preventing-opioid-use-disorder

NIH HEAL INITIATIVE

For more information on the NIH HEAL Initiative, see https://heal.nih.gov

The Importance of Social Determinants

- NIH held a <u>HEAL Initiative-sponsored Workshop</u> in September, 2020
 - To identify research gaps and priorities to advance our understanding of how social determinants impact the opioid crisis.
 - To explore opportunities for high-impact, scalable strategies to intervene on malleable factors to prevent opioid misuse and improve other drug use outcomes.
- Need for a comprehensive approach to address the opioid crisis. Attention to modifiable "upstream" factors has been largely missing.
- Research can provide evidence needed to inform the public sector response.



Description of RFA-DA-22-036: Preventing Opioid Misuse and Co-Occurring Conditions by Intervening on Social Determinants

- Goal is to support research that tests multi-level prevention strategies for intervening directly on social determinants of health to reduce the risk for opioid misuse and co-occurring conditions.
- Research should seek to reduce health inequities in a population or population subgroup affected by the opioid crisis.
- Research project must examine mechanisms of intervention effects.
- Research project must include economic analysis to inform decisions about intervention adoption.
- Funding Mechanism: R01 (Clinical Trials Optional)



Key concepts

Social Determinants:

conditions that lead to health disparities through systematic, direct and indirect effects on the development and progression of disease as well as access to health resources. Also see: <u>Healthy</u> <u>People 2030 Objectives</u>

Multi-level Intervention:

strategy to intervene on two or more ecological levels of influence, e.g., the individual, interpersonal, community, and societal levels. Also see <u>NIMHD Research Framework</u>



Outcome variables

 Studies must specify an <u>opioid misuse-related prevention outcome</u> as a primary outcome. Examples include:

>initiation of opioid misuse or polysubstance use

➢ progression from opioid misuse to OUD or injection drug use

- Studies must specify a <u>co-occurring condition</u> as a secondary outcome. Examples include:
 - ➢other substance misuse
 - mental health conditions
 - ➤ suicidal behavior



Responsiveness Criteria

Applicants must...

- propose a multi-level intervention addressing social determinants
- identify 1) opioid misuse-related indicator and 2) co-occurring condition as dependent variables
- provide justification for selection of population or population subgroup affected by the opioid crisis
- test mechanisms of action or mediational processes linking social determinants of health to study outcomes
- describe plans for economic analysis



Other considerations

- Theoretical basis for intervention
- Rigor of study design and study measures
- Plan for Enhancing Diverse Perspectives (PEDP)
- Demonstration of commitment from collaborators and partners
- Potential of intervention for timely, wide-spread adoption and sustainability
- Ethical considerations



National Institute of Mental Health

- Interested in applications relevant to RFA priorities and support the <u>NIMH</u> <u>Strategic Plan for Research</u>
- Committed to supporting research that reduces disparities and advances equity in mental health interventions, services, and outcomes.
- Applications proposing clinical trials should follow NIMH's <u>experimental</u> therapeutics approach to intervention development and testing
- Encourages a deployment-focused model of intervention and services design and testing that takes into account the perspective of relevant stakeholders and the key characteristics of the settings that are intended to implement optimized mental health interventions.
- Encourages effectiveness research on potentially scalable preventive, therapeutic, and services interventions that focuses on practice-relevant questions.



Awardee participation in NIH HEAL Initiative

NIH HEAL Initiative recipients should expect to participate in Program Director/Principal Investigator (PD/PI) meetings, including an annual HEAL Investigators Meeting, as well as other activities.

In accordance with the HEAL Initiative Public Access and Data Sharing Policy (<u>https://heal.nih.gov/about/public-access-data</u>), all applications are required to include a Data Management and Sharing Plan outlining how scientific data and any accompanying metadata will be managed and shared.



RFA-DA-22-036: NIH HEAL Initiative—Preventing Opioid Misuse and Co-Occurring Conditions by Intervening on Social Determinants

	Pre-application TA Webinar	January 6, 2022
Key	Non-binding letter of intent due date	February 2, 2022
Dates	Application Receipt date*	March 2, 2022
	Scientific Merit Review	June, 2022
	Earliest Project Start Date	September, 2022

*All applications are due by 5:00 PM local time of applicant organization.



Application guidelines

- Maximum project period is 5 years; scope of project should determine the project period.
- Application budget is not limited, but must reflect the actual needs of the proposed project.
- Non-U.S. entitles and non-U.S. components of U.S. organizations are not eligible to apply.
- Foreign components are *not* allowed.



Peer Review Process & Review Criteria

Presented by Dr. Sheila Pirooznia, NIDA

APPLICATION REVIEW

- Administrative review carried out by NIH staff
- Submissions evaluated by NIH staff for
 - Completeness and compliance (See <u>NOT-OD-17-105</u>)
 - Adherence to NIH formatting guidelines
 - Biosketch and Other Support Format page requirements (See NOT-OD-21-073)
 - For clinical trial applications:
 - Check to determine if your study is a <u>NIH-Defined Clinical Trial</u>.
 - Be certain to comply with requirements for NIH-Defined Clinical Trials.
- If applicable, use a single IRB as required by the <u>NIH Single IRB Policy</u>
- Include **only** allowable appendix materials as per the application instructions.
- FOA Requirements: Inclusion of Special Considerations listed in the FOA

Incomplete applications or applications not adhering to the FOA requirements may be returned without review



PEER REVIEW

- Peer review of applications conducted at NIDA
- Special Emphasis Panel created by the SRO based on the areas of science described in the application
- Conflicts of interest are managed for all panel members
- At least three reviewers assigned to evaluate each application
- Panel will receive guidance from NIH staff on how to evaluate the application
- Panel members have at least 30 days to evaluate the application
- Meeting roster is publicly available 30 days before the meeting

APPLICATION REVIEW CRITERIA Section V of FOA

Core Review Criteria

- Significance
- Investigators
- Innovation
- Approach
- Environment

Additional Review Criteria

- Study Timeline (for CT applications only)
- Protection of Human Subjects
- Inclusion of Women, Minorities, and Individuals Across the Lifespan

Additional Review Considerations

Select Agents, Resource Sharing Plan, Authentication, Budget

Overall Impact

Likelihood for the project to exert a sustained, powerful influence on the research field(s) involved

NIH HEAL INITIATIVE

APPLICATION REVIEW CRITERION DETAILS Section V of FOA

Clinical trial requirements and FOA specific questions listed under individual core review criteria in addition to the standard requirements

Specific to this FOA:

Significance:

Test multi-level intervention outcomes on prevention measures for opioid misuse and co-occurring conditions. Address long-term impacts on disparities. Engage stakeholders and potential adopters to support long-term sustainment of effective strategies.

Investigators:

Multidisciplinary team with appropriate expertise and track record of research in relevant study domains

Contd...



APPLICATION REVIEW CRITERION DETAILS Section V of FOA

Specific to this FOA:

Innovation:

Expand understanding of multi-level interventions. Inform mechanisms of action of social determinants

Approach:

Feasibility of multi-level intervention strategy Meaningful engagement of community collaborators and/or stakeholders Adequacy of recruitment and retention plans. Reasonable study timeline Appropriate and robust data collection and management procedures, Rigorous study design and analytical plan for stated aims



PEER REVIEW OUTCOME

- As part of the scientific peer review, all applications will receive a written critique (*summary statement*)
- 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
- Summary statement will be available within 4-6 weeks after the peer review meeting





Moderated by Dr. Barbara Oudekerk, NIDA

Please enter your questions in the Zoom Webinar Q&A box

Thank you for attending!

For more information, please see RFA-DA-22-036 and consult with RFA contacts (see Section VII of the RFA).