The Partnership for Native American Cancer Prevention (NACP) invites proposals from interested research teams: all proposed projects must be co-led by at least one investigator at Northern Arizona University (NAU) and at least one investigator at the University of Arizona Cancer Center (UACC). We seek to provide seed funding for projects that will develop to apply for future external funding support. Anticipated funding start date: September 1, 2022. All proposals are subject to National Cancer Institute approval.

**THE PARTNERSHIP FOR NATIVE AMERICAN CANCER PREVENTION (NACP) GOALS and CORE VALUES**

1. To reduce the cancer burden within the Native American population through research and community engagement.
2. Expand the number of Native American investigators working in cancer research.
3. Increase the total number of investigators focused on cancer health disparities within the Native American communities of Arizona.

NACP recognizes that Tribes are sovereign Nations. NACP conducts research in adherence to Tribal rights of oversight, ownership, equal partnership, and determination of harms and benefits. No aspects of research are conducted without appropriate regulatory review and approval, and this will include explicit Tribal review and approval when required, including data acquisition and results dissemination. All NACP researchers and affiliates are expected to abide by these core values.

**CALL FOR PROPOSALS**

Anticipated Funding Start Date: September 1, 2022

Pilot and Full Project Proposals will be funded. Total direct costs to be shared between NAU and UACC; the usual funding ratio is 50% to NAU and 50% to UACC. Individual budgets should be calculated for each institution, with renewal for each year contingent on project productivity.

**PILOT PROJECT PROPOSAL.** Pilot projects should be similar in scope to an NIH R21. We anticipate having funds to initiate 1-2 pilot projects for 2 years of funding. Projects may be funded for up to $120,000 per year.

**FULL PROJECT PROPOSAL.** Full projects should be similar in scope to an NIH R01. We anticipate having funds to support 1-2 full projects for 2 years of funding. Projects may be funded for up to $250,000 per year.

**CANCER RESEARCH PRIORITIES FOR NATIVE AMERICAN COMMUNITIES**

- Cancer prevention programs (e.g., consumer education regarding healthy foods, effectiveness of traditional healing, translation of cancer information into native languages and digital formats, targeting youth for screening or for tobacco uptake control and cessation, “train the trainer” programs for cancer education interventions in communities, media and social media approaches to cancer education and advocacy, assessments of cancer health literacy and links to screening rates and/or health outcomes, incorporating traditional cultural practices)
- Capacity building for Tribal cancer programs (focus on cancer health disparities)
- Specific issues for cancer caregivers
- End of life or quality of life
- COVID-19 and cancer care
Cancer survivorship issues (e.g., traditional foods for people undergoing treatments, patient navigation programs in Indian health care systems, family models of treatment and care, case management approaches)

Tribal cancer epidemiology, surveillance, and measurement (improving quality and quantity of cancer data in Tribal communities; approaches to measuring cultural concepts)

Impact of historical trauma on health and cancer disparities

Basic cancer science research focused on cancers of significance to Native American populations

Individual physical and mental health of cancer patients, survivors, caregivers, family members; factors influencing patient compliance or persistence with treatment; issues influencing provision of care (e.g., geography, economics, language barriers, insurance, cultural factors)

Environmental causes and correlates of cancer (uranium and other mining issues and impacts, indoor air quality related to wood smoke and heating/cooling, water quality)

Dissemination and implementation science (e.g., indigenous evaluation methods, community advocacy and outreach effectiveness, closing the loop by sharing research findings with community)

Resilience and physical/mental health promotion

Policy-focused research (e.g., community involvement in identifying needs, collaborating in research design and execution, feedback to policy makers in community, development and validation of indigenous health indices or indicators)

Clinical trials (e.g., side effects of breast cancer treatments, environmental exposures and correlation with cancer, complementary and alternative medicine)

LETTERS OF INTEREST AND INTENT

LETTER OF INTEREST (Optional) - The letter of interest should include a proposed research topic and identify the research partners at each institution (if known). NACP will use this letter of interest to provide assistance, if needed, to find a partner; please indicate the type of expertise you are seeking in a partner. If your proposed project includes community partners, please identify the organization or Tribe that you are interested in partnering with. NACP will work with interested investigators to find collaborators at NAU or UACC, and to develop competitive proposals. Please e-mail the letter of interest to Ms. Maria Jackson (Maria.Jackson@nau.edu) by 5 pm on February 1, 2021.

LETTER OF INTENT (Required) – The letter of intent is required and should briefly describe the nature and scope of the project (1 paragraph) and the names and contact information of the co-investigators from NAU and UACC. Because applications will also be reviewed by external reviewers, we ask that the LOIs also list the names and contact information for one or more potential external (outside of both NAU and UA) reviewers with expertise appropriate to the project. Please submit letter of intent to Ms. Maria Jackson (Maria.Jackson@nau.edu) by 5 pm on July 30, 2021. We will acknowledge receipt. Selected projects will be invited to submit a proposal.

PROPOSAL SUBMISSION Due: November 1, 2021

PROPOSAL FORMAT – Proposals should follow the NIH format for the PHS 398 Research Plan for an R21 application. Details may be found in PAR-18-361 and in the SF424 (R&R) Application Guide and NIH PHS 398 instructions. Proposals should contain the following sections:

• Title Page and Specific Aims (1 page limit): Title of project, names of co-leaders from both partner institutions, and specific aims stating the objectives of the project.

• Relevance to NACP (1 page limit): Describe how this project will advance the overall goals of the NACP and how Native American students/investigators/collaborators will be involved. (See above for information on research priorities for American Indian communities in Arizona, based on exchanges with our Community Action Committee and the work of our Outreach Core.)
• **Budget Pages:** For initial and entire proposed period of support, consisting of a different budget for each institution (NIH PHS 398 Sections 4.4-4.5; SF424 R&R Budget or sample budget form)

• **NIH Biosketch Forms:** For all senior/key personnel and other significant contributors (NIH PHS 398 Section 4.6 or a link to format page)

• **NIH Other Support Pages:** For all senior/key personnel and other significant contributors (NIH PHS 398 Section 4.6.1 or a link to format page)

• **Research Strategy** (no more than 6 pages for a pilot project, no more than 12 pages for a full project) to include: (1) Significance, (2) Innovation, (3) Preliminary Studies, (4) Approach.

**Notes:** (1) Other Sections of PHS 398 (Sections 5.5.4-5.5.15) must also be completed if applicable but are excluded from page limitations. Projects Involving Outreach Research may include focus groups and needs assessments. Research projects involving clinical trials must include a data and safety-monitoring plan as described in the SF424 Application Guide instructions. Any research involving human subjects will require IRB approval and any research involving vertebrate animals will require IACUC approval. In addition, projects involving participants whether the project is defined as a clinical trial must include an Inclusion Enrollment table that projects the number of participants to be accrued/recruited. Projects are required to comply with the instructions for the Resource Sharing Plans (Data Sharing Plan, Sharing Model Organisms, and Genome Wide Association Studies (GWAS)) as provided in the SF424 (R&R) Application Guide, as well as complying with the NIH Genomic Data Sharing Policy.

Each application must include written "Letters of Support", from the native communities they are engaged with. Any research involving Native American participants will be required to follow ABOR and university policy on Tribal Consultation.

Proposals are due electronically by **5 pm on due date**. One complete application package should be submitted per pair of investigators. Applications should be submitted to Ms. Maria Jackson (Maria.Jackson@nau.edu) at NACP. We will acknowledge receipt of your proposal and will evaluate for all required sections.

**EVALUATION CRITERIA FOR PILOT AND FULL PROJECTS**

Proposals will be review and scored by 4 committees (1) ad hoc (external) reviewers, (2) NACP Internal Advisory Committee, (3) NACP Community Advisory Board, (4) Program Steering Committee. Proposers will receive written feedback and copies of the reviews. Proposals chosen for funding will be included in our annual renewal and subsequently approved by NCI.

Proposals will be critiqued using the NIH scoring system: [http://grants.nih.gov/grants/peer/guidelines_general/scoring_system_and_procedure.pdf](http://grants.nih.gov/grants/peer/guidelines_general/scoring_system_and_procedure.pdf)

Proposals will be evaluated based on:

1. scientific merit of the research project,
2. strength of the project team,
3. potential of the proposed project to garner independent external support,
4. relevance to Native American cancer related health concerns,
5. evidence of respecting Tribal sovereignty throughout research proposal and details on adherence to NACP goals and core values, and
6. overall quality of the written application.

Frequent reasons for a project to not achieve a fundable score are: (1) low scientific merit; (2) low relevance to the objectives of the partnership; (3) low potential to develop into an externally funded project/program through competitive peer review.