

# NIH GUIDE

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## For Grants and Contracts

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ERRATUM

The Index for Volume 15, No. 22, October 24, 1986, was inadvertently omitted from that issue. The index appears on page 13 of this issue.

BIOMEDICAL RESEARCH SUPPORT GRANT APPLICATIONS FOR FISCAL YEAR 1987

P.T. 34; K.W. 0710030, 1014002

Division of Research Resources

Application Receipt Date: January 2, 1987

**BACKGROUND**

The Biomedical Research Support Grant (BRSBG) Program is designed to provide funds to eligible institutions (i.e., those heavily engaged in health-related research) to strengthen their programs by allowing flexibility to meet emerging opportunities in research; to explore new and unorthodox ideas; and to use these research funds in ways and for purposes which, in the judgment of the grantee institution, would contribute most effectively to the furtherance of their research program.

**ELIGIBILITY**

Awards are made to non-profit institutions, not directly to individual investigators. Health professional schools, other academic institution, hospitals, state and municipal health agencies, and research organizations may apply, if during FY 1986 (October 1, 1985 through September 30, 1986), the institution was awarded a minimum of three allowable PHS biomedical or health-related behavioral research grants and/or cooperative agreements, totaling \$200,000 (including direct and indirect costs). Federal institutions, foreign institutions, and profit-making institutions are not eligible.

NOTE: Other academic includes, as a single eligible component, all other schools, departments, colleges and free-standing institutes of the institution except the health professional schools.

**AWARD CONDITIONS**

The BRSBG award is for one year with eligibility determined annually. The start date is April 1. Awards are contingent upon the availability of funds.

The amount of each BRSBG award is based upon a formula that is applied to the total of direct and indirect costs awarded for allowable PHS research grants.

**METHOD OF APPLYING**

BRSBG application kits (Form NIH-147-1) will be mailed on or about November 26 to institutions that, according to NIH records, are eligible to apply for a BRSBG.

Completed BRSBG applications must be received by January 2, 1987.

If an institution believes that it is eligible and has not received an application kit by December 5, 1986, please submit a letter of request to:

Mrs. Gilda Polletto  
Grants Management Specialist  
Office of Grants and Contracts Management  
Division of Research Resources  
National Institutes of Health  
Building 31, Room 5B32  
9000 Rockville Pike  
Bethesda, Maryland 20892

This program is described in the Catalog of Federal Domestic Assistance, No. 13.337, Biomedical Research Support. Grants will be awarded under the authority of the Public Health Service Act, Section 301 (a)(3); Public Law 86-798, (42 USC 241) and administered under PHS grant policies and Federal Regulations 45 CFR Part 74 and the Biomedical Research Support Grant Information Statement and Administrative Guidelines. This program is not subject to the intergovernmental review requirements of the Executive Order 12372 or Health Systems Agency review.

MEDICAL INFORMATICS RESEARCH TRAINING

RFA AVAILABLE: 87-LM-01

P.T. 44; K.W. 1004017, 1004008, 1004020

National Library of Medicine

Application Receipt Date: January 20, 1987

The National Library of Medicine (NLM) announces the availability of a Request for Applications (RFA) on the above subject. Awards will be made for a period of up to five years.

The main purpose of this training grant program is to help meet a growing need for qualified, talented investigators, well equipped to address fundamental issues in the use of computers and automated information systems in health care, health professions education, and biomedical research. These investigators will contribute to the growth of science by their studies of knowledge management and by advancing the frontiers of the computer sciences for organizing, retrieving, and utilizing health knowledge. It is also intended to foster Medical Informatics as a growing discipline with an appropriate place in academic medicine. It is expected that trainees will become able, cross-disciplinary translators, taking the computer sciences to all of medicine.

It is expected that four to six awards will be made; however, actual award of grants is necessarily contingent upon receipt of funds appropriated for this purpose. These awards are authorized by the Medical Library Assistance Act and are not a part of the National Research Service Awards Program of the Public Health Service.

TIMETABLE

Letter of Intent:	December 15, 1986
Application Receipt Date:	January 20, 1987
Technical Review:	April 1987
Board of Regents Review:	May 1987
Award Date:	July 1, 1987

INQUIRIES

Inquiries concerning this program and requests for copies of the RFA should be addressed to:

Roger W. Dahlen, Ph.D.  
Chief, Biomedical Information Support Branch  
Extramural Programs  
National Library of Medicine  
Bethesda, Maryland 20894  
Telephone: (301) 496-4221

STRENGTH OF MOTIVATION AND FERTILITY-RELATED BEHAVIOR

RFA AVAILABLE: 87-HD-03

P.T. 34; K.W. 0413002, 0404000, 0414000, 0750020, 0730010

National Institute of Child Health and Human Development

Application Receipt Date: March 31, 1987

BACKGROUND INFORMATION

The Demographic and Behavioral Sciences Branch (DBSB), Center for Population Research (CPR), National Institute of Child Health and Human Development (NICHD), supports research on the antecedents and consequences of fertility and fertility regulation. This RFA invites scientists to submit grant applications for the support of basic psychological research on the strength of motivation for fertility-related behavior and the subsequent impact of changes in strength of motivation on fertility-related behavior.

Despite the availability of safe, effective contraceptives, half of all pregnancies are regarded as unintended, and half of these end in abortion. The number of out-of-wedlock pregnancies continues to increase, and the timing of marriages and births is often the result more of "accident" than planning. Research has been underway for some time on motivation for fertility-related behavior, including studies of the related decision-making process. However, very little research has

been done to date with emphasis on strength rather than type of motivation, even though strength rather than type may actually be more important in determining behavior.

Research on this topic is urgently needed in order to understand and predict the demand for family planning services which include counseling on contraception, and treatment of infertility and problems in conceiving. In addition, the research is needed to understand and predict behavior concerning spacing, timing and number of pregnancies and births, and both the use-effectiveness of existing contraceptives and the potential acceptability of new contraceptives or other means of controlling fertility.

#### RESEARCH GOALS AND SCOPE

Research applications are invited to address:

- 1 Measurement and analysis of strength of motivation for fertility-related behavior.

This area could include theory-building research, studies aimed at developing and/or improving methodology for the measurement of the strength of motivation and measurement of relative strengths of motivation for fertility-related behavior.

While it is anticipated that most proposals for this RFA will be basic, psychological, in-depth, theoretically-based, empirical research, some highly experienced investigators might submit proposals which do not necessarily include empirical research, but which could consist of a selective, analytical review of pertinent literature and a resulting well-reasoned paper clearly stating theoretical issues and concisely postulating a reworked theory or a new theoretical approach which would be of use to investigators doing research on the relationship between strength of motivation and fertility-related behavior.

Studies which focus entirely or for the most part on improving methodology for measurement of strength of motivation and/or changes in strength of motivation for fertility-related behavior, would be appropriate in response to this RFA. Proposals to use case histories alone, or simply to do a literature review, would not be appropriate. Research teams must include research-oriented psychologists.

- 2 Identification and measurement of factors which affect strength of motivation for fertility-related behavior.

Investigators may propose to identify and measure medical, demographic, physical, social, economic, political, cultural, service delivery system, physical environmental, geographic, and other factors which may affect or be related to strength of motivation for fertility-related behavior.

- 3 Analysis of how fertility-related behavior changes as strength of motivation changes.

Investigators might be concerned here with one or more aspects of how such specific fertility-related behavior as contraceptive choice, acceptability of new contraceptives, effectiveness and consistency of contraceptive use, number of children borne, timing and spacing of births, decisions for sterilization, adopting out of offspring, abortion, and medical care sought to aid in conception, are affected by changes in strength of motivation.

Investigators are encouraged to propose research on various parts or combinations of the research issues discussed above. It is not necessary to propose research on every research area given above. For instance, a project could be reasonable in scope which dealt with an issue such as how a change in strength of motivation affects acceptability of a new contraceptive. Another example could be to study how age, sex, socioeconomic status, ethnic group, marital status, and fertility history are related to strength of motivation for effective use of contraceptives. Thus, scientists submitting proposals in response to this RFA may choose from a wide variety of topics and a generous breadth of scope so long as every proposal is well based in theory and clearly concerned with strength of motivation for fertility-related behavior.

#### MECHANISM OF SUPPORT

Support for this program will be through the traditional research grant. Policies that govern research grant programs of the National Institutes of Health will prevail.

## APPLICATION AND REVIEW PROCEDURE

Applications submitted in response to this RFA will be reviewed for scientific merit by an initial review group which will be convened by the Scientific Review Program of the National Institute of Child Health and Human Development to review only these applications.

The factors to be used in evaluating the scientific merit of each application will include originality of the proposed research and originality of approach; quality of theoretical-conceptual framework; adequacy of research design; appropriateness of data analysis techniques; suitability of facilities; training, experience, and research competence of investigators; and soundness of proposed budget. These criteria will be used to evaluate each application relative to the goals of the subject RFA.

Requests for the full RFA may be directed to:

Dr. Gloria Kamenske  
Demographic and Behavioral Sciences Branch  
Center for Population Research, NICHD  
Room 7C25, Landow Building  
7910 Woodmont Avenue  
Bethesda, Maryland 20892  
Telephone: (301) 496-1174

## GENETICS AND EPIGENETICS OF TROPHECTODERM DEVELOPMENT

RFA AVAILABLE: 87-HD-04

P.T. 34; K.W. 0413002, 1002053, 1002017

National Institute of Child Health and Human Development

Application Receipt Date: February 19, 1987

The Reproductive Sciences Branch (RSB), of the Center for Population Research (CPR), of the National Institute of Child Health and Human Development (NICHD), announces the availability of a Request for Applications (RFA) on the genetic and epigenetic factors that control trophectoderm development. The purpose of this program is to encourage and support research in non-human organisms on genetic, biochemical, biophysical and molecular biological approaches to the problem of the formation of the animal egg into the first epithelium, referred to as the trophectoderm in mammals and the blastula in non-mammals. The fact that trophectoderm formation is the predominant activity of preimplantation development underscores its importance to mammalian reproduction. This genetic and epigenetic emphasis on trophectoderm development is part of an RSB program on the developmental biology of reproduction that encompasses gametogenesis through implantation research. This initiative is a critical aspect of the mission of the RSB to provide a research base for improved understanding of human and animal reproduction with implications for the control of fertility and the prevention and treatment of infertility.

This program will be funded through the individual research project award program. Grant applications will be reviewed at a single competition by an initial review group convened by NICHD. It is anticipated that 10 grants will be awarded contingent on scientific merit and availability of funds.

Requests for copies of the full RFA should be addressed to:

Richard J. Tasca, Ph.D.  
Reproductive Sciences Branch  
Center for Population Research  
National Institute of Child Health  
and Human Development  
Room 7C33, Landow Building  
National Institutes of Health  
Bethesda, Maryland 20892  
Telephone: (301) 496-6515

COOPERATIVE AGREEMENT FOR ADDITIONAL CLINICAL CENTERS FOR THE COOPERATIVE CLINICAL STUDY OF DIETARY MODIFICATION ON THE COURSE OF PROGRESSIVE RENAL DISEASE (MDRD STUDY)

RFA AVAILABLE: 87-DK-01

P.T. 34; K.W. 0755015, 0785095, 0710095

National Institute of Diabetes and Digestive and Kidney Diseases

Application Receipt Date: February 17, 1987

The National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK) invites applications for Clinical Centers to participate with the NIDDK under cooperative agreements in the Cooperative Clinical Study of Dietary Modification on the Course of Progressive Renal Disease (MDRD Study).

#### BACKGROUND INFORMATION

In 1983, the NIADDK (now, NIDDK) issued Requests for Cooperative Agreement Applications inviting applications for Clinical Centers and for a Data Coordinating Center from institutions willing to participate with the NIADDK under a Cooperative Agreement Program in a multicenter cooperative clinical study seeking to define the influence of dietary protein restriction on progression of Chronic Renal Disease. Nine Clinical Centers and a Data Coordinating Center were selected on the basis of peer review and received awards to undertake the initial phases of this multi-center Clinical Trial.

Chronic renal disease of diverse origins typically follows a progressive course toward end-stage renal failure, even if the original disease process has become inactive. Why this occurs is not known. However, previous preliminary clinical and laboratory observations suggested that the progressive course of chronic renal disease may be favorably altered by restriction of dietary protein and phosphorus. Nine centers have developed the Protocols and Operations Manual which will be used in the clinical trial. In addition they have conducted limited pilot studies to test these materials. The centers selected to participate in the full trial will be required to use the already developed protocols.

#### RESEARCH GOALS AND SCOPE

Each collaborating clinical center will be responsible for recruiting patients, evaluating and treating them according to the established protocols, collecting and recording data, and forwarding the data to a coordinating center. The details of the MDRD study, including study organization, protocols and procedures, and all other matters relating to the conduct of the study will be made available to respondents.

#### MECHANISM OF SUPPORT

The administrative and funding mechanism used to support Clinical Centers for the MDRD is a cooperative agreement between each participating institution and the NIDDK.

Under the cooperative agreement, a negotiated partner relationship exists between the recipient of the award and the NIDDK in which the performer of the activity is responsive to the requirements and conditions set forth in the RFA and agrees to accept NIDDK staff advice and involvement in the execution of the project.

The specific terms, conditions, and arbitration procedures pertaining to the scope and nature of the interaction between the NIDDK and the Clinical Centers eligible for participation are described in the RFA and will be incorporated in the Notice of Award.

It is anticipated that 600-700 total patients will be enrolled in the study and that each center will enroll not less than 50 in the final protocol.

Letter of intent receipt date	January 8, 1987
Application receipt date	February 17, 1987
Scientific merit review	March-May 1987
NDDK Advisory Council review	
Anticipated award date	September 1987

## INQUIRIES

Requests for the complete RFA and additional information should be addressed to:

Anna M. Sandberg, Dr. P.H.  
Clinical Trial Coordinator  
Division of Kidney, Urologic, and  
Hematologic Diseases  
National Institute of Diabetes and  
Digestive and Kidney Diseases  
National Institutes of Health  
Westwood Building, Room 619  
Bethesda, Maryland 20892  
Telephone: (301) 496-7133

## SPECIALIZED CENTERS OF RESEARCH IN ARTHRITIS AND MUSCULOSKELETAL DISEASES

RFA AVAILABLE: 86-AR-01

P.T. 04; K.W. 0705050, 0785155, 0785195

National Institute of Arthritis and Musculoskeletal and  
Skin Diseases

Application Receipt Date: March 4, 1987

### BACKGROUND

The National Institute of Arthritis and Musculoskeletal and Skin Diseases (NIAMS) announces a national competition to encourage submission of research center applications (P50), which will establish a limited number of Specialized Centers of Research (SCORs) in arthritis and musculoskeletal diseases.

Disorders of the joints and connective tissues continue to afflict approximately 36 million Americans. More than 100 disorders are categorized under the term arthritis. Basic research has generated new findings that have led to advances in knowledge and an increased understanding of rheumatic and musculoskeletal disorders and their treatment. The availability of resources provided by the SCOR will make it possible for new groups of investigators to capitalize on recently proposed research recommendations and opportunities.

### RESEARCH GOALS AND SCOPE

The goal of this RFA is to solicit applications for Specialized Centers of Research in three areas of special importance to the NIAMS:

- o Rheumatoid Arthritis
- o Osteoarthritis
- o Osteoporosis

The proposed multidisciplinary Specialized Centers of Research would capitalize on existing geographic aggregates of basic and clinical investigators who are capable of using advanced technology to pursue research on specific diseases. SCOR programs would encourage active collaboration among investigators and scientific disciplines involved in arthritis and musculoskeletal diseases research.

### MECHANISM OF SUPPORT

Support for this program will be through the grant-in-aid, using the Specialized Center of Research, and will be governed by policies of grant programs of the National Institutes of Health. Support for the centers is contingent upon ultimate receipt of appropriated funds for this purpose.

### METHOD OF APPLYING

Center applications in response to this announcement will be evaluated in national competition by a Special Review Committee convened by the NIAMS. Due to time constraints it is unlikely that site visits will be conducted during the review process. Deadline for receipt of applications will be March 4, 1987; a letter of intent is requested before December 15, 1986. No waiver of the receipt date will be considered. Any application arriving later than the stated receipt date will be returned to the applicant. The expected starting date for funded projects will be approximately September 1, 1987.



Potential applicants may request additional information, copies of the complete RFA, and guidelines for preparing an application for a Specialized Center of Research from:

Steven J. Hausman, Ph.D  
Deputy Director, Extramural Activities Program  
National Institute of Arthritis and  
Musculoskeletal and Skin Diseases  
Westwood Building, Room 403  
Bethesda, Maryland 20892  
Telephone: (301) 496-7495

INTERNATIONAL COLLABORATION IN INFECTIOUS DISEASES RESEARCH

RFA AVAILABLE: 87-AI-04

P.T. 34, 26; K.W. 0715125, 0785215

National Institute of Allergy and Infectious Diseases

Application Receipt Date: September 15, 1987

The Microbiology and Infectious Diseases Program of the National Institute of Allergy and Infectious Diseases invites the submission of Program Project Grant applications to establish a program in International Collaboration in Infectious Diseases Research. The program objective is a collaborative effort in biomedical research of recognized relevance to the health of people in tropical countries. Diseases of interest include malaria, schistosomiasis, filariasis, trypanosomiasis, leishmaniasis and leprosy. Also of special programmatic interest are bacterial, parasitic and viral enteric infections. All of these disease areas are of mutual concern of the World Health Organization. While these diseases constitute major world health problems, it is not the intent of the program to exclude other diseases of equal importance. The grant will be awarded to a United States based institution which has developed a satisfactory affiliation with an established university, research institute, federal or state health department, or the equivalent thereof, in the foreign host country. It is projected that 70-80 per cent of the research will be done in the host country.

INQUIRIES

Copies of the RFA and additional information may be obtained from:

Earl S. Beck, Ph.D.  
Chief, Parasitology and Tropical Diseases Branch  
Microbiology and Infectious Diseases Program  
National Institute of Allergy and Infectious Diseases  
Westwood Building, Room 737  
5333 Westbard Avenue  
Bethesda, Maryland 20892  
Telephone: (301) 496-2544

ONGOING PROGRAM ANNOUNCEMENTS

RESEARCH EVALUATING FAMILY INVOLVEMENT STRATEGIES IN AFL ADOLESCENT PREGNANCY CARE SERVICES

Office of Adolescent Pregnancy Programs, Office of  
Population Affairs

First Application Receipt Date: February 2, 1987

This is a specific announcement focusing on particular research opportunities under the more general opportunities for research on adolescent family life made available through the Office of Adolescent Pregnancy Programs (OAPP), Office of Population Affairs, PHS, DHHS in an announcement issued in the NIH Guide for Grants and Contracts on November 8, 1985 and in the Federal Register on November 18, 1985 (Vol. 50, No. 222, pp. 47502-47503.) OAPP is interested in rapid accomplishment of the research identified in this specific announcement and encourages submissions by the earliest possible date (February 1, 1987).

## BACKGROUND INFORMATION

The Adolescent Family Life (AFL) Program, administered by OAPP, was enacted in 1981 to develop and evaluate model demonstration projects to postpone adolescent sexual activity; develop and evaluate model demonstration care projects that provide comprehensive health and social services for pregnant or parenting teens; present adoption as an option to parenting for young, unmarried mothers; and conduct research on related topics. The AFL research component supports both basic and applied research in order to provide knowledge needed to support the range of AFL program goals. Among the areas of needed research identified in a standing announcement of general research opportunities issued by OAPP is evaluations of strategies in the delivery of adolescent pregnancy services. This specific announcement invites researchers to submit grant applications for support of research that evaluates particular family involvement strategies utilized in programs that deliver care services to pregnant or parenting teens.

The model demonstration projects funded by the AFL Program are legislatively required to involve families in their service delivery efforts. Evaluation of these projects is also legislatively mandated. Access to the evaluation data accumulating on these projects will be permitted investigators responding to this announcement. Responses to this specific announcement must propose analyses utilizing to the fullest extent possible the evaluation data that are available on AFL model demonstration care projects; however, the utilization of other relevant data for comparative purposes or the collection of additional needed data may be proposed as well.

## RESEARCH SCOPE AND GOALS

The adverse consequences of premarital adolescent pregnancy and parenthood for the individual teenager, her children, her family, and for the larger society have been well documented. Teenage pregnancy and parenthood tend to produce poor outcomes in health, educational, economic, and person-social areas for the teen mother, with related effects occurring for her child. A public concern with problems associated with teenage pregnancy and parenting has prompted increased attention to the provision of care services to pregnant and parenting teens over the last several years.

A goal of the AFL program is to mobilize familial forces toward better outcomes for adolescents and their offspring, while decreasing the stresses and burdens placed on family members themselves. Particular strategies adopted by AFL care projects have ranged from including an interview with the pregnant or parenting teen's mother as part of the intake process to providing intense involvement with a number of family members, as well as the male partner, via group counseling, support groups or other family-system-oriented approaches for bringing the entire set of family relationships into the picture.

The central research question at issue is the effectiveness in reducing the negative consequences of adolescent pregnancy and parenthood of family involvement strategies initiated in AFL adolescent pregnancy care projects. Many sub-issues arise in addressing the core question, however. For example, 1) How does agency setting affect the kind of family involvement strategy employed, as well as its effectiveness? Types of agencies delivering care services to pregnant and parenting adolescents include hospitals, health departments, schools, social service agencies, and residential homes, all potentially differing in their general and specific approaches to client-provider interaction. In addition, the agency settings in which care services are provided may have organizational differences that could possibly impinge on effectiveness of family involvement strategies, in that services may be provided by a single provider at one site, by a single provider at multiple sites, or by a network of providers at one or more sites. Other organizational characteristics of concern in how they affect the effectiveness of family involvement strategies are funding level, staffing level, and caseloads. 2) What effect do staff attitudes, knowledge, and training in the area of family involvement have on effectiveness of family involvement programs? 3) How does geographic location, particularly on a rural-urban dimension, modify family involvement strategies and their effectiveness? 4) How do characteristics of the client population enter into the provision of family-oriented services in care programs and affect their effectiveness? Of particular interest is the role played by client's age, socioeconomic status, race/ethnicity, cultural identity, and values.

While researchers are not required either to address all issues identified above, or to limit their analysis to stated issues, a comprehensive evaluation of significant factors influencing the relative success of different family involvement strategies in various AFL care project settings is desired. Applications should include a well-organized statement of the problem to be addressed, the research design, the conceptual framework within which the design has been developed, the methodology to be employed, the evidence upon which the analysis will rely, and the manner in which the evidence will be analyzed.

The source of data for answering the research questions posed above are those data bases maintained by current AFL care demonstration projects. There are approximately 60 such projects, the majority of which are voluntarily collecting data in a standard format, in order to carry out required evaluation activities. For more information on accessing these data bases, contact:

Dr. Dennis McBride  
Office of Population Affairs  
HHH Building, Room 7C1E  
200 Independence Avenue, S.W.  
Washington, D.C. 20201  
Telephone: (202) 245-1181

#### MECHANISMS OF SUPPORT

The support mechanisms for this program will be the individual research project grant award and the Office of Population Affairs New Investigator Research Award (OPA-NIRA). Direct costs should not exceed \$100,000 for each year of the project in the former case and \$75,000 in the latter case. While awards can be made for a maximum of three years, OAPP is giving preference to shorter term projects up to 18 months in duration for this particular research opportunity. Yearly continuation of a multi-year award is contingent on grantee performance and availability of funds. Competition is open to any corporation, public or private institution or agency, including corporations operated for profit.

This announcement is an announcement of specific opportunities for AFL research and will prevail until further notice. Funding decisions can be expected within eight months of an application receipt date. Approximately one million dollars is available annually from OAPP for new awards across all AFL research areas, including the area being highlighted in this specific announcement, contingent upon the receipt of appropriated funds for this purpose.

#### REVIEW PROCEDURES AND CRITERIA

Applications in response to this solicitation will be reviewed on a nationwide basis and in competition with other submitted applications by committees convened by the Division of Research Grants/NIH, in accord with the usual NIH peer review procedures. Peer review criteria include: (1) Scientific merit and significance of the project; (2) Competency of proposed staff in relation to the type of research involved; (3) Feasibility of the project; (4) Reasonableness of proposed budget period in relation to the proposed research; (5) Amount of grant funds necessary for completion, and adequacy of applicant's resources available for project; (6) Adequacy of methodology proposed to carry out research; (7) Adequacy of the proposed means for protecting against adverse effects upon humans, animals, or the environment, where an application involves activities which could have such effects.

Applications recommended for approval will be selected for funding by the Deputy Assistant Secretary for Population Affairs, on the basis of priority scores, AFL program relevance, and availability of funds.

#### METHOD OF APPLYING

Applications should be prepared on PHS form 398, which is available in the business or grants and contracts office at

Office of Grants Inquiries  
Division of Research Grants  
National Institutes of Health  
Westwood Building, Room 449  
5333 Westbard Avenue  
Bethesda, Maryland 20892  
Telephone: (301) 496-7441

Completed applications should be submitted to:

Division of Research Grants  
National Institutes of Health  
Westwood Building, Room 240  
5333 Westbard Avenue  
Bethesda, Maryland 20892

Type across the mailing envelope and item two on the application face page: "Research on Adolescent Family Life." In addition, "OPA-NIRA" should be added for proposals falling in this specialized category. Organizations which contemplate submitting an OPA-NIRA application should request relevant guidelines from the OPA contact named below before developing the application, and follow the guidance contained therein.

Routine application receipt dates are February 1, June 1, and October 1; however, for this specific announcement, OAPP encourages the earliest possible submission.

#### IDENTIFICATION OF CONTACT POINT

For general information regarding this announcement, investigators may contact:

Eugenia Eckard  
Office of Population Affairs  
OASH, DHHS  
HHH Building, Room 731E  
200 Independence Avenue, S.W.  
Washington, D.C. 20201  
Telephone: (202) 245-1181

#### RESEARCH EVALUATING FACTORS INFLUENCING SUCCESS OF ADOPTION COMPONENTS IN AFL ADOLESCENT PREGNANCY CARE PROJECTS

P.T. 34; K.W. 0730005, 0730010, 0403001, 0775020, 0404000

Office of Adolescent Pregnancy Programs, Office of  
Population Affairs

First Application Receipt Date: February 2, 1987

This is a specific announcement focusing on particular research opportunities under the more general opportunities for research on adolescent family life made available through the Office of Adolescent Pregnancy Programs (OAPP), Office of Population Affairs, PHS, DHHS in an announcement issued in the NIH Guide for Grants and Contracts on November 8, 1985 and in the Federal Register on November 18, 1985 (Vol. 50, No. 222, pp. 47502-47503.) OAPP is interested in rapid accomplishment of the research identified in this specific announcement and encourages submissions by the earliest possible date (February 1, 1987).

#### BACKGROUND INFORMATION

The Adolescent Family Life (AFL) Program, administered by OAPP, was enacted in 1981 to develop and evaluate model demonstration projects to postpone adolescent sexual activity; develop and evaluate model demonstration care projects that provide comprehensive health and social services for pregnant or parenting teens; present adoption as an option to parenting for young, unmarried mothers; and conduct research on related topics. The AFL research component supports both basic and applied research in order to provide knowledge needed to support the range of AFL program goals. Among the areas of needed research identified in a standing announcement of general research opportunities issued by OAPP is evaluations of strategies in the delivery of adolescent pregnancy services. This specific announcement invites researchers to submit grant applications for support of research that evaluates particular program components that are designed to maximize adoption planning utilized in programs that deliver care services to pregnant or parenting teens.

The model demonstration projects funded by the AFL Program are legislatively required to provide adoption counseling and referral in their service delivery efforts. Evaluation of these projects is also legislatively mandated. Access to the evaluation data accumulating on these projects will be permitted investigators responding to this announcement. Responses to this specific announcement must propose analyses utilizing to the fullest extent possible the evaluation data that are available on AFL model demonstration care projects; however, the utilization of other relevant data for comparative purposes or the collection of additional needed data may be proposed as well.

#### RESEARCH SCOPE AND GOALS

A goal of the AFL Demonstration program is to test various approaches to promoting adoption as an option for teen parents. While all of the care programs are required to provide adoption counseling, directly or through referral, there is considerable variation in adoption rates among grantees. These rates range from 0 to 48 percent and average slightly over five percent for all teen clients giving birth in AFL projects.

Several research questions can be pursued to help illuminate why such differential success in promoting adoption has occurred. First, analyses are needed of how sociodemographic characteristics of project clients are related to the adoption decision. Pertinent client characteristics include client's age, ethnicity, pregnancy history, family constellation, family income, living arrangements, school status, work history, parents' and male partner's attitudes toward pregnancy resolution, reason for making an adoption plan, and post-adoption adjustments.

Investigators are encouraged to comparatively analyze relevant data from both AFL projects and other sources such as the Center for Social Statistics and the National Surveys of Family Growth.

Another area of research interest is the contribution of AFL agency characteristics to higher rates of adoption planning among clients. Does agency adoption rate systematically vary according to whether the agency is school-based, community-based or home-based? Does type of agency (i.e., health department, hospital, social service agency) make a difference? Does an urban or rural location have an effect? Are there differences in adoption rates according to resources agencies have? Does staff knowledge about, or attitudes toward, adoption affect adoption rates?

A central research area is the role of program components and strategies in promoting higher rates of adoption, given particular client and agency characteristics. Of special interest among AFL care projects are programs that (1) provide all clients with adoption counseling and information, not just those clients showing an initial intention of adopting, (2) provide an adoption component that is integrated into the overall program and presented at fixed intervals throughout the client's pregnancy, (3) provide training in adoption issues for their staff, (4) include family, male partners, peers, and other potential sources of social influences on adoption decision making, (5) offer counseling for the natural mother (and possibly the father) following separation from the child, and (6) have facilities, or referral to facilities, exclusively for those considering adoption that is separate from facilities that provide services to those expectant teens considering parenting.

While researchers are not required either to address all research areas identified above, or to limit their analysis to stated issues, a comprehensive evaluation of significant factors influencing the relative success of different adoption program components and strategies in the context of client and project characteristics is desired. Applications should include a well-organized statement of the problem to be addressed, the research design, the conceptual framework within which the design has been developed, the methodology to be employed, the evidence upon which the analysis will rely, and the manner in which the evidence will be analyzed.

The major sources of data for answering the research questions posed above are those data bases maintained by current AFL care demonstration projects. There are approximately 60 such projects, the majority of which are voluntarily collecting data in a standard format, in order to carry out required evaluation activities. For more information on accessing these data bases, contact:

Dr. Dennis McBride  
Office of Population Affairs  
HHH Building, Room 731E  
200 Independence Avenue, S.W.  
Washington, D.C. 20201  
Telephone: (202) 245-1181

#### MECHANISMS OF SUPPORT

The support mechanisms for this program will be the individual research project grant award and the Office of Population Affairs New Investigator Research Award (OPA-NIRA). Direct costs should not exceed \$100,000 for each year of the project in the former case and \$75,000 in the latter case. While awards can be made for a maximum of three years, OAPP is giving preference to shorter term projects up to 18 months in duration for this particular research opportunity. Yearly continuation of a multi-year award is contingent on grantee performance and availability of funds. Competition is open to any corporation, public or private institution or agency, including corporations operated for profit.

This announcement is an announcement of specific opportunities for AFL research and will prevail until further notice. Funding decisions can be expected within eight months of an application receipt date. Approximately one million dollars is available annually from OAPP for new awards across all AFL research areas, including the area being highlighted in this specific announcement, contingent upon the receipt of appropriated funds for this purpose.

#### REVIEW PROCEDURES AND CRITERIA

Applications in response to this solicitation will be reviewed on a nationwide basis and in competition with other submitted applications by committees convened by the Division of Research Grants/NIH, in accord with the usual NIH peer review procedures. Peer review criteria include: (1) Scientific merit and significance of the project; (2) Competency of proposed staff in relation to the type of research involved; (3) Feasibility of the project; (4) Reasonableness of proposed budget period in relation to the proposed research; (5) Amount of grant funds necessary for

completion, and adequacy of applicant's resources available for project; (6) Adequacy of methodology proposed to carry out research; (7) Adequacy of the proposed means for protecting against adverse effects upon humans, animals, or the environment, where an application involves activities which could have such effects.

Applications recommended for approval will be selected for funding by the Deputy Assistant Secretary for Population Affairs, on the basis of priority scores, AFL program relevance, and availability of funds.

#### METHOD OF APPLYING

Applications should be prepared on PHS form 398, which is available in the business or grants and contracts office at most academic and research institutions or from:

Office of Grants Inquiries  
Division of Research Grants  
National Institutes of Health  
Westwood Building, Room 449  
5333 Westbard Avenue  
Bethesda, Maryland 20892  
Telephone: (301) 496-7441

Completed applications should be submitted to:

Division of Research Grants  
National Institutes of Health  
Westwood Building, Room 240  
5333 Westbard Avenue  
Bethesda, Maryland 20892

Type across the mailing envelope and item two on the application face page: "Research on Adolescent Family Life." In addition, "OPA-NIRA" should be added for proposals falling in this specialized category. Organizations which contemplate submitting an OPA-NIRA application should request relevant guidelines from the OPA contact named below before developing the application, and follow the guidance contained therein.

Routine application receipt dates are February 1, June 1, and October 1; however, for this specific announcement, OAPP encourages the earliest possible submission.

#### IDENTIFICATION OF CONTACT POINT

For general information regarding this announcement, investigators may contact:

Eugenia Eckard  
Office of Population Affairs  
OASH, DHHS  
HHH Building, Room 731E  
200 Independence Avenue, S.W.  
Washington, D.C. 20201  
Telephone: (202) 245-1181

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