NIH GUIDE

For Grants and Contracts

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The NIH Guide announces scientific initiatives and provides policy and administrative information to individuals and organizations who need to be kept informed of opportunities, requirements, and changes in extramural programs administered by the National Institutes of Health.

Vol. 18, No. 15, 1989
April 28, 1989

NOTICES

DATED ANNOUNCEMENTS (RFPs AND RFAs)

ONGOING PROGRAM ANNOUNCEMENTS

CHANGE IN THE NUMBERS OF COPIES OF APPLICATIONS TO BE SUBMITTED FOR AIDS EXPEDITED REVIEW

P.T. 34; K.W. 1014002, 1014006

National Institutes of Health
Alcohol, Drug Abuse, and Mental Health Administration

The number of copies of applications required for investigator-initiated AIDS research project grant (R01) or First Independent Research Support and Transition (FIRST) award (R29) applications for expedited review has been changed. Beginning with the May 2, 1989, receipt date, applicants to NIH and ADAMHA will be required to submit the ORIGINAL APPLICATION PLUS 24 LEGIBLE COPIES instead of the presently required 32 copies. The number of copies of appendix materials remains at 6. This announcement supercedes the earlier notice published in the NIH Guide for Grants and Contracts, Vol. 17, No. 13, page 1, April 8, 1988. Applicants for other mechanisms of AIDS research, development, and training support should refer to the earlier notices from the NIH Guide (Vol. 17, No. 9, March 11, 1988) for the correct numbers of copies to be submitted and other relevant information.

HEALTH AND SAFETY GUIDELINES FOR GRANTEES AND CONTRACTORS

P.T. 34; K.W. 1014002, 0725010, 0725020

National Institutes of Health
Alcohol, Drug Abuse, and Mental Health Administration

This notice is a republication, with minor modifications, of a November 1988 issuance on this subject. It is being reissued to emphasize its continuing importance.

Organizations receiving grant or contract awards are responsible for protecting their personnel from hazardous conditions. The Government is not legally liable for accidents, illnesses, or claims arising out of research performed under its awards, but the National Institutes of Health (NIH) and the Alcohol, Drug Abuse, and Mental Health Administration (ADAMHA) are nonetheless aware that a variety of hazards threaten the safety and health of both laboratory and clinical research personnel. Accordingly, the guidelines that follow are designed to (1) identify potential hazards, (2) advise awardee organizations and investigators of certain standards that should be considered in order to address particular health and/or safety concerns, and (3) emphasize that concerns about potentially hazardous conditions could result in grant or contract funding delays until those concerns have been resolved to the satisfaction of the awarding component.

1. Sources of potential danger to research personnel include the following classes of hazard:

a. Biohazards (e.g., Human Immunodeficiency Virus, HIV; other infectious agents; oncogenic viruses).

b. Chemical hazards (e.g., carcinogens; chemotherapeutic agents; other toxic chemicals; flammable or explosive materials).

c. Radioactive materials.

2. The following guidelines and standards contain information designed to assist grantees and contractors in providing a safe work environment for research personnel. Therefore, depending upon the particular safety hazard at issue, grantees and contractors are expected to consult these standards.

a. Biosafety in Microbiological and Biomedical Laboratories, U.S. Department of Health and Human Services, Centers for Disease Control and the National Institutes of Health. HHS Publication No. (CDC) 88-8395.

b. Recommendations for Prevention of HIV Transmission in Health-Care Settings. Morbidity and Mortality Report, August 21, 1987, Vol. 35, No. 2S.

c. Update: Universal Precautions for Prevention of Transmission of Human Immunodeficiency Virus, Hepatitis B Virus, and Other Bloodborne Pathogens in Health-Care Settings. Morbidity and Mortality Weekly Report, June 24, 1988, Vol. 37, No. 24.

d. Agent Summary Statement for Human Immunodeficiency Viruses (HIV); Included are HTLV-III, LAV, HIV-1, and HIV-2. Morbidity and Mortality Weekly Report, April 1, 1988, Vol. 37, No. 24.

e. Recommendations for the Safe Handling of Parenteral Antineoplastic Drugs, NIH Publication No. 83-2621.

f. NIH Guidelines for the Laboratory Use of Chemical Carcinogens, NIH Publication NO. 81-2385.

g. Guidelines for Research Involving Recombinant DNA Molecules (49 FR 46266 or latest revision) and Administrative Practices Supplement.

h. Procedures for the Domestic Handling and Transport of Diagnostic Specimens and Etiologic Agents, National Committee for Clinical Laboratory Standards, July 17, 1985, Vol. 5, No. 1.

i. Standards issued pursuant to the National Occupational Safety and Health Act of 1970 (29 CFR 1910).

j. Standards issued pursuant to the Atomic Energy Act of 1954 (42 USC 2021).

3. Grant applications and contract proposals posing special hazards typically are identified during the initial review process, but such concerns can formally be expressed by agency staff or consultants at any time prior to award. Regardless of the timing of the described concern, grant or contract funding could be delayed until the matter has been resolved to the satisfaction of the awarding component.

Special hazards that are identified after an award is made may lead to suspension of work under the grant or contract pending corrective action by the awardee. (See 45 CFR 74, Subpart M, concerning grant suspension and 48 CFR 12.5 concerning contract "stop work" orders.)

4. The materials identified in section 2 (a-h) of this notice may be obtained as follows.

ITEMS a-f: Division of Safety
Office of Research Services
National Institutes of Health
Building, 31, Room 1C02
Bethesda, Maryland 20892

ITEM g: Office of Recombinant DNA Activities
Office of Science Policy and Legislation
National Institutes of Health
Building 31, Room 4B11
Bethesda, Maryland 20892

ITEM h: National Committee for Clinical Laboratory Standards
771 East Lancaster Avenue
Villanova, Pennsylvania 19085

5. Grantee and contractor organizations are not required to submit documented assurance of their specific attention to the guidelines and standards identified in section 2 of this notice. However, where dictated by the circumstances, grantees and contractors should be able to provide evidence that pertinent health and safety standards have been considered and, where necessary, have been put in practice. Such evidence may be requested by appropriate NIH and ADAMHA staff; for example, during a site visit.

REVISED GUIDELINES FOR CORE GRANTS

P.T. 34; K.W. 1002046, 0710030, 0715100

National Eye Institute

The National Eye Institute (NEI) has recently revised its application guidelines for Core Grants for Vision Research (P30). The objectives of the NEI Core Grant Program are: (1) to enhance an institution's environment and capability for conducting vision research; (2) to facilitate collaborative studies of the visual system and its disorders; and (3) to attract scientists of diverse disciplines to research on the visual system.

To be eligible for Core Grants, institutions must have at least four NEI-supported investigators, each with at least two years of committed support remaining on a regular research grant (R01), FIRST award (R29), or MERIT award

(R37) at the time of submission of the application. The NEI currently provides up to $750,000 (direct costs) over a 5-year period in support of a Core Grant. An exception to this limit may be made for applications requesting a Biostatistics Module. Applications that specifically include such a module may request up to $1,050,000 (direct costs) over a 5-year period. The purpose of a Biostatistics Module would be the development of staff and other resources needed to enhance programs of clinical vision research through the application of epidemiologic and biostatistical methodology to clinical problems. The NEI has one receipt date for Core Grant applications: June 1 of each year. Copies of the new guidelines may be obtained by contacting:

Ralph J. Helmsen, Ph.D.
Research Training and Resources Officer
National Eye Institute
Building 31, Room 6A48
Bethesda, Maryland 20892
Telephone: (301) 496-5884

REVISED GUIDELINES FOR CLINICAL VISION RESEARCH DEVELOPMENT AWARD

P.T. 34; K.W. 1002046, 0785035

National Eye Institute

The National Eye Institute (NEI) has recently revised its application guidelines for the Clinical Vision Research Development Award (R21). The objective of the Clinical Vision Research Development Award is to encourage more clinical vision research groups to provide leadership in the design, coordination, and conduct of clinical trials and other epidemiologic research projects. The NEI will provide for this purpose up to $60,000 (direct costs) per year for up to five years. This award cannot be renewed. To be eligible for an R21 award, institutions must have at least two participating investigators with an active NEI grant, contract, or cooperative agreement award to conduct clinical research. Institutions that apply for or already receive NEI Core Grant support (P30) ARE NOT eligible for an R21 award. Support for the kinds of clinical research activities described above can be requested in a new, competing continuation, or supplemental Core Grant application, by including a Biostatistics Module.

The NEI has one receipt date for Clinical Vision Research Development Award applications: June 1 of each year. Copies of the new guidelines may be obtained by contacting:

Richard L. Mowery, Ph.D.
Chief, Collaborative Clinical Research Branch
National Eye Institute
Building 31, Room 6A51
Bethesda, Maryland 20892
Telephone: (301) 496-5983

IMPLEMENTATION OF EXPANDED AUTHORITIES FOR GRANTEE ORGANIZATIONS

P.T. 34; K.W. 1014002, 1014006

Alcohol, Drug Abuse, and Mental Health Administration

In March 1986, five Federal agencies and ten universities in the State of Florida under the auspices of the Government/University/Industry Research Roundtable of the National Academy of Sciences, National Research Council, began a demonstration project (the "Florida Demonstration Project") designed to address ways in which unnecessary administrative burdens on sponsored research could be eliminated. Based on a review of the results of the Florida Demonstration Project, the Office of Management and Budget (OMB) authorized Federal agencies to make routine use of the most successful features of the project which were designed to reduce overhead costs and increase research productivity.

Consequently, the Alcohol, Drug Abuse, and Mental Health Administration (ADAMHA) implemented these expanded authorities for grantee organizations on applicable research awards beginning February 1, 1989. The ADAMHA implemented the expanded authorities for grantees consistent with the notice in the NIH Guide for Grants and Contracts, Vol. 17, No. 34, October 21, 1988 - Page 1. PHS plans to provide comprehensive policy guidance which will incorporate the expanded authorities in routine grants administration. The PHS-wide changes

will be incorporated in the PHS Grants Policy Statement and the PHS Grants Administration Manual.

Until the PHS policy is issued, the four expanded authorities (extension without additional funds, incurrence of preaward costs, carryover of unobligated balances, and cost related prior approvals) and all remaining cognizant awarding agency prior approval authorities will be implemented in accordance with the October 21, 1988 NIH Guide announcement. The expanded authorities apply to all the "R" series grant award mechanisms except:

R10 Cooperative Clinical Research Grants

R18 Research Demonstration and Dissemination Projects; and

R43, R44 Small Business Innovation Research Grants.

In addition, an awarding component may specifically exclude a grant award from those authorities when deemed necessary by programmatic and/or administrative considerations, for example, clinical trials supported by a regular research project (R01). In such cases, special conditions will be stated on the Notice of Grant Award.

Further, because ADAMHA and NIH possess a common constituency of grantees, ADAMHA is making these expanded authorities retroactive to October 1, 1988, to provide for a uniform implementation and avoid possible grantee confusion. For covered research awards made between October 1, 1988 and January 31, 1989, ADAMHA will issue revised awards that indicate application of the expanded authorities. However, even though the policy is being made retroactive, grantee institutions are not authorized to override written grants management officer disapprovals of prior approval requests made during the period October 1, 1988 to January 31, 1989.

DATED ANNOUNCEMENTS (RFPs AND RFAs)

COORDINATING CENTER FOR AN ASSESSMENT OF THE EFFICACY OF MINOCYCLINE IN THE TREATMENT OF RHEUMATOID ARTHRITIS

RFP AVAILABLE: RFP-NIH-NIAMS-89-2

P.T. 34; K.W. 0755015, 0755018, 0715010

National Institute of Arthritis and Musculoskeletal and Skin Diseases

The National Institute of Arthritis and Musculoskeletal and Skin Diseases (NIAMS) is seeking organizations to serve as the coordinating center for a multicenter, randomized, double-blind, placebo-controlled clinical trial that will assess the efficacy of minocycline hydrochloride in the treatment of rheumatoid arthritis. The coordinating center will participate with five clinical centers and the NIAMS in all phases of the clinical trial.

This Request for Proposal, RFP No. NIH-NIAMS-89-2, will be issued on or about April 25, 1989, with a closing date set for July 25, 1989.

To receive a copy of this RFP, please supply this office with two self-addressed mailing labels and cite the RFP number referenced above. Requests must be in writing and addressed to:

Shirley A. Shores
Contracts Management Branch
National Institute of Arthritis and Musculoskeletal and
Skin Diseases
National Institutes of Health
Westwood Building, Room 602
Bethesda, Maryland 20892

This advertisement does not commit the Government to make an award.

CLINICAL CENTERS FOR AN ASSESSMENT OF THE EFFICACY OF MINOCYCLINE IN THE TREATMENT OF RHEUMATOID ARTHRITIS

RFP AVAILABLE: RFP-NIH-NIAMS-89-3

P.T. 34; K.W. 0755015, 0715010, 0745070

National Institute of Arthritis and Musculoskeletal and Skin Diseases

The National Institute of Arthritis and Musculoskeletal Skin Diseases (NIAMS) is seeking organizations to serve as the clinical centers for a multicenter, randomized, double-blind, placebo-controlled clinical trial that will assess the efficacy of minocycline hydrochloride in the treatment of rheumatoid arthritis. The clinical centers will participate with a coordinating center and the NIAMS in all phases of the clinical trial.

This Request for Proposal, RFP No. NIH-NIAMS-89-3, will be issued on or about April 25, 1989, with a closing date set for July 25, 1989. The Institute expects to fund four to five centers for this study.

To receive a copy of this RFP, please supply this office with two self-addressed mailing labels and cite the RFP number referenced above. Requests must be in writing and addressed to:

Shirley A. Shores
Contracts Management Branch
National Institute of Arthritis and Musculoskeletal and
Skin Diseases
National Institutes of Health
Westwood Building, Room 602
Bethesda, Maryland 20892

This advertisement does not commit the Government to make an award.

CULTURED NEURON PROBE

RFP AVAILABLE: RFP-NIH-NINDS-89-22

P.T. 34; K.W. 0710050, 0705055, 0780020

National Institute of Neurological Disorders and Stroke

The National Institute of Neurological Disorders and Stroke (NINDS) has a requirement to investigate the feasibility of establishing connectors with specific target neuronal populations in the mammalian central nervous system (CNS) by developing and evaluating a cultured neuron probe.

Offerors should have experience in culturing neurons and electrophysiological techniques for stimulating and recording from neurons.

This is an announcement of an anticipated Request for Proposals. RFP-NIH-NINDS-89-22 will be issued on or about May 1, 1989, with a closing date of July 3, 1989, for receipt of proposals. It is anticipated that one contract award will be made.

To receive a copy of the RFP, please supply this office with two self-addressed mailing labels. All responsible sources may submit a proposal which will be considered by the agency.

The RFP will be available upon request to:

Contracting Officer
Contracts Management Branch
National Institute of Neurological
Disorders and Stroke, NIH
Federal Building, Room 901
7550 Wisconsin Avenue
Bethesda, Maryland 20892

A FACILITY FOR ANIMAL MODELS FOR VIRAL HEPATITIS EXPERIMENTS

RFP AVAILABLE: RFP-NIH-NIAID-OSD-90-18

P.T. 34; K.W. 1002002, 1002045, 0715125, 0755020

National Institute of Allergy and Infectious Diseases

The Intramural Research Program, Office of the Scientific Director of the National Institute of Allergy and Infectious Diseases, has a requirement to house and maintain non-human primates and woodchucks for use in viral hepatitis experiments. Respondents must have facilities capable of housing approximately 85 non-human primates at all times (up to 25 infant and juvenile chimpanzees, and 60 marmosets or monkeys). Additionally, up to 25 other small animals (primarily woodchucks, but occasionally rabbits and guinea pigs) will be held. It is required that such facilities have the capacity to move air through isolation units at a rate of 12-15 air changes per hour. The facility must have a back-up generator to immediately compensate for any power failures that may occur. In addition, the facilities proposed by the offeror must include a waste disposal system capable of sterilizing all waste material prior to release into available sewage systems. Animals, caging, and isolation units will be provided by the Government.

Any contract awarded will be subject to DHHS regulations regarding the use of animal subjects in research.

One contract may be awarded as a result of this solicitation. It is expected that the contract will have a five-year period of performance.

The issuance of the RFP will be on or about April 28, 1989, and proposals will be due by the close of business on June 12, 1989. Any responsible offeror may submit a proposal which will be considered by the Government.

Requests for the RFP should be directed to:

Mr. Thomas C. Porter, Contracting Officer
Contract Management Branch
National Institute of Allergy and Infectious Diseases
National Institutes of Health
Westwood Building, Room 707
Bethesda, Maryland 20892

To receive copies of the RFP please provide this office with two self-addressed mailing labels.

This advertisement does not commit the Government to award a contract.

OPERATE CAENORHABDITIS GENETIC CENTER

RFP: NIH-RR-89-07

P.T. 34; K.W. 1002019, 1002027, 0780005

Division of Research Resources

The Division of Research Resources requires the operation of a caenorhabditis genetic center to acquire, maintain, and distribute wild-type and mutant strains of C. elegans for biomedical research and to characterize these strains, stimulate research using C. elegans as a model system and to act as a resource of genetic information for investigators. The Government anticipates the award of one three-year cost reimbursement-type contract.

This is an announcement of an anticipated request for proposals which will be issued on or about May 1, 1989. The closing date for receipt of proposals will be on or about June 15, 1989.

The RFP will be available upon request from:

Danielle Kaczensky, Contracting Officer
Research Contracts Branch, DCG
National Institutes of Health
Building 31, Room 1B44
9000 Rockville Pike
Bethesda, Maryland 20892

PRESOLICITATION: COLLABORATIVE STUDIES FOR METHODOLOGIC RESEARCH FOR MULTI-SITE EPIDEMIOLOGIC SURVEYS OF MENTAL DISORDERS IN CHILD AND ADOLESCENT POPULATIONS

P.T. 34, AA; K.W. 0785055, 0715129, 0404021

RFA: MH-89-22

National Institute of Mental Health

Anticipated RFA Availability Date: May 5, 1989
Anticipated Application Receipt Date: July 5, 1989

INTRODUCTION

The purpose of this announcement is to alert researchers in the field of mental disorders to the proposed issuance of a Request for Applications (RFA) for a collaborative study to plan and conduct methodologic research to develop assessment instruments and procedures which could be used in a coordinated multi-site epidemiologic and services research study of mental disorders of children and adolescents. The reason for the presolicitation announcement is to enable interested sites to consider preparation of applications as the amount of time between the issuance of the RFA and the receipt date will be very short.

PROJECT GOALS

The goal of this project is to develop and validate survey instruments and procedures which could be used in a second phase, full-scale, multi-site epidemiologic and services research study of mental disorders of children and adolescents. The ultimate goal of this two-phase program is to obtain estimates of prevalence rates of major mental disorders in children and adolescents and data on the use of services by children for mental health problems and barriers to such care.

Based on analyses of pilot studies conducted by each site in the first year of this study, the collaborators will develop a core survey questionnaire and other survey procedures for use in a standardized manner across sites in subsequent, community-based field trials, using a minimum sample size of 500 child/parent interviews. The core questionnaire may include a psychiatric diagnostic interview and an assessment of demographic, psychosocial, and behavioral risk factors; a measure of impairment; and a health care utilization section to determine the use of general medical, mental health and social services.

The sample selection process should assure representation of minority groups appropriate for that site.

MECHANISM OF SUPPORT

This project will be supported by the cooperative agreement mechanism which differs from investigator-initiated research grants. Although the awardees are primarily responsible for the conduct of the study, there will be collaboration among the participating sites and NIMH staff will have substantial programmatic involvement above and beyond the levels regularly required for traditional program management of grants.

Among the major criteria used to evaluate applications received in response to the RFA are the following: (1) adequacy of the conceptual and theoretical framework for the study of the complex measurement and sampling issues involved in studies of the epidemiology of mental disorders in children; (2) adequacy of the existing and proposed facilities, resources, and site staff, including access to a population size sufficient to provide the required number of respondents; (3) adequacy of the data analysis plan; and (4) ability to cooperate with other sites and with the NIMH in the development of survey assessment instruments and procedures to be used in a standardized manner across sites in the field trials.

Up to six research applications may be funded under this program and applicants may request support for up to 3 years. Issuance of the RFA for this program is expected to be May 5 and is contingent on approval of the program concept paper and the availability of funds. It is anticipated that $3 million will be available for this project in FY 1989. A proposed receipt date for applications is July 5 with IRG review in August. It is expected that applications for a subsequent multi-site study based on the experiences of this methodologic research will be solicited by NIMH at the conclusion of this initial award period.

ELIGIBILITY

Eligibility for review and funding under this program is limited to applications for domestic-based research designed for U.S. populations.

INQUIRIES

For further information or to receive a copy of the RFA when it is available, please contact as soon as possible:

Ben Z. Locke
Chief, Epidemiology and Psychopathology Research Branch
Division of Clinical Research
National Institute of Mental Health
10C-05 Parklawn Building
5600 Fishers Lane
Rockville, Maryland 20857
Telephone: (301) 443-3774

or Karen H. Bourdon
Social Science Analyst
at the same address and telephone number

AIDS AND ITS BEHAVIORAL CAUSES: CHILDREN'S KNOWLEDGE AND EMOTIONS

RFA AVAILABLE: 89-HD/MH/DA-07

P.T. 34, AA; K.W. 0715008, 0404000, 0715125, 0745027

National Institute of Child Health and Human Development
National Institute of Mental Health
National Institute on Drug Abuse

Application Receipt Date: July 31, 1989

The Human Learning and Behavior Branch of the National Institute of Child Health and Human Development, the Health and Behavior Research Branch of the National Institute of Mental Health, and the Clinical Medicine Branch of the National Institute on Drug Abuse invite research grant applications for studies on six-to-twelve-year-old children's knowledge and feelings regarding: (a) Human Immunodeficiency Virus (HIV) infection and mechanisms of its transmission; (b) Acquired Immunodeficiency Syndrome (AIDS) as an illness and its health consequences; and (c) human sexuality and drug abuse. By requesting investigators to submit applications pertaining to one or more of the above areas of interest, the three Institutes seek to stimulate investigators' interest in an area of research that is important to their mission--AIDS prevention.

BACKGROUND

The Department of Health and Human Services has identified AIDS as the foremost public health problem in the United States. The Centers for Disease Control report that there have been over 85,000 cumulative cases of AIDS in the country, and the number is increasing. Many more individuals who do not manifest the defining characteristics of AIDS are thought to be infected with HIV, the precursor of AIDS. The number of children with AIDS is quite small. As of October 1988, 311 cases were reported for the age group between 13 and 16. However, 21 percent of all individuals diagnosed as having AIDS are between 20 and 29 years of age. Since the incubation period for AIDS may range from one to six years in adults, it is clear that some of the young men and women who are affected contracted the disease when they were adolescents.

HIV infection is primarily transmitted by the exchange of bodily fluids during unprotected sexual intercourse or when intravenous drugs are injected by contaminated needles. Since inner city youth, especially Blacks and Hispanics, start experimenting with sex and with drugs at a relatively young age, they are at the highest risk for HIV infection.

The Surgeon General has argued for the importance of initiating AIDS related education when children are as young as six years of age. As a consequence, AIDS education programs are being implemented in schools around the country. These programs are based on some general knowledge about child development but are not based on specific scientific knowledge regarding what children of different ages actually know or feel about AIDS. Likewise, these programs are not based on specific scientific knowledge about what AIDS-related information children of different ages can understand and integrate into their existing knowledge base.

Since the transmission of AIDS is, to a large extent, dependent on human practices in the domain of sexuality and drug use, teachers are focusing on education pertaining to sexuality, sexual behavior, and substance abuse. As in the case of education about AIDS as a disease, the scientific base for the education is limited. It consists of general principles of cognitive development and extremely limited information on children's understanding of and feelings regarding sexual relations, the human need for intimacy and love, or the causes and consequences of drug abuse.

Education-relevant scientific data are, therefore, needed to implement scientifically guided, age appropriate educational programs about AIDS and its behavioral causes.

RESEARCH GOALS AND SCOPE

This request for applications calls for developmental research about six-to-twelve year old children's knowledge, attitudes and feelings regarding AIDS, sexuality, sexual behavior and substance abuse. The results of this research are intended to inform and guide the planning of AIDS-related educational programs.

Psychological-developmental and physiological-maturational variables are hypothesized to be important determinants of children's motivation to learn and ability to understand AIDS related information. Research is needed to examine the relationships among children's cognitive development; their physiological development; and their knowledge about HIV infection, AIDS, the behavioral causes of the infection and its consequences. In addition, research is needed to explore and explain the relationship between developmental/maturational variables and children's knowledge about sexuality and substance abuse.

Environmental variables such as urban living or poverty and cultural variables such as minority status are hypothesized to be very important in determining children's feelings and knowledge regarding AIDS, sexuality and substance abuse. Research is needed to identify the environmental and cultural factors that are most influential and to specify some of the processes by which environment and culture impact on what children think and feel in the domains under inquiry.

The distinction between what children know, believe and feel and what they are capable of understanding is an important one to make. When left to their own resources, children piece together fragments of information to build their knowledge and to form attitudes. This is particularly the case when societal taboos prevent them from finding out what "experts" know or believe. While educators should know what children of a given developmental and maturational level and of a specific sociocultural background know, believe and feel, they should also know what these children are capable of learning. The requested research may provide such information.

Proposed research designs may include both cross-sectional and longitudinal methods. Applicants are invited to develop new methods and new tasks for studying the development of the above general areas of research. These may include interviews, questionnaires and problem-solving tasks.

Since no one study can focus on all the above aspects of the needed research, investigators are encouraged to choose a subset of research problems that are closest to their interest and to study these in great depth.

PHS urges applicants for grants to give added attention (where feasible and appropriate) to the inclusion of minorities in study populations for research in the behavioral and social sciences. If minorities are not included in a given study, a clear rationale for their exclusion should be provided. Investigators are reminded that merely including arbitrary numbers of minority group participants in a given study is insufficient to guarantee generalization of results.

MECHANISMS OF SUPPORT

Support for this program will be through the traditional research grant (R01), the first award (R29) and the small grant (R03) mechanisms. Policies that govern grant-in-aid award programs of the Public Health Service will prevail.

The support of grants pursuant to this RFA is contingent upon ultimate receipt of appropriate funds for this purpose. It is anticipated that up to nine meritorious applications will be funded under this program. However, the number of awards will depend on the amount of funds available to the Institutes, the overall merit of the proposals, and their relevance to program goals.

APPLICATION PROCEDURES

Applications must be submitted on form PHS 398 (revised 9/86) which includes form HHS-596 dealing with protection of human subjects.

The RFA label (found in the 9/86 revision of application form PHS 398) must be affixed to the bottom of the face page of the original copy of the application. Failure to use this label could result in delayed processing of your application such that it will not reach the review committee in time for review.

The deadline for receipt of applications is July 31, 1989. Applications received after this date will not be considered.

ADDITIONAL INFORMATION

Potential applicants are encouraged to request the detailed Request for Application by writing to:

Sarah L. Friedman, Ph.D.
Health Scientist Administrator
Human Learning and Behavior Branch
National Institute of Child Health and Human Development
9000 Rockville Pike, EPN Room 633
Bethesda, Maryland 20892

OR

Leonard Mitnick, Ph.D.
Chief, Health and Behavior Research Branch
National Institute of Mental Health
Parklawn Building, Room 11C06
5600 Fishers Lane
Rockville, Maryland 20857

OR

Rodney R. Cocking, Ph.D.
Chief, Cognition and Learning Program
Behavioral Sciences Research Branch
National Institute of Mental Health
Parklawn Building, Room 11C10
5600 Fishers Lane
Rockville, Maryland 20857

OR

Zili Amsel, Sc.D.
Clinical Medicine Branch
National Institute on Drug Abuse
Parklawn Building, Room 10A08
5600 Fishers Lane
Rockville, Maryland 20857

DEVELOPING AND IMPROVING INSTITUTIONAL ANIMAL RESOURCES

RFA AVAILABLE: 89-RR-02

P.T. 34; K.W. 1002002, 0201011

Division of Research Resources

Application Receipt Dates: Aug. 7, 1989 and Dec. 4, 1989

BACKGROUND

The Division of Research Resources (DRR) is continuing its competitive grant program to help institutions upgrade and develop their animal facilities. DRR anticipates that $10.931 million may be available to support 35 to 40 animal facility improvement grants in Fiscal Year 1990.

RESEARCH GOALS AND SCOPE

Institutional animal resource improvement grants are awarded to assist biomedical research and educational institutions in upgrading their animal facilities and developing a centralized animal care program. A major objective is to enable institutions to comply with the USDA Animal Welfare Act

and DHHS policies on the care and treatment of animals. These awards are limited to Alterations and Renovations (A&R) to improve laboratory animal facilities and related major resource equipment, such as animal cages and cage washers. It is not the purpose of the improvement grant to provide general operating costs for the resource. The projects are supported for one year.

To gain approval and support, both the need for resource improvement as well as a sound plan to meet the requirements of the Public Health Service Policy on Humane Care and Use of Laboratory Animals must be presented and described in the context of the biomedical research and research training program of the institution.

ELIGIBILITY AND REVIEW

Any domestic public, or private institution, organization or association with one or more research projects supported by the Public Health Service and involving the use of animals is eligible to apply. Applicants are expected to develop a single proposal for campus-wide service.

Applications will be received by the Division of Research Grants. Applicants must use PHS Form 398, "Application for Public Health Service Grant." The following receipt dates have been established: August 7, 1989 and December 4, 1989. Applications received after these dates will be returned. The RFA label available in the PHS Application Form 398 (revised 10/88) must be affixed to the bottom of the face page. All applications submitted in response to this RFA will be reviewed by the DRR Animal Resources Review Committee for scientific merit and the National Advisory Research Resources Council for program considerations. All applications will be pooled for funding in the summer, 1990.

MECHANISM OF SUPPORT

Awards will be made as competitive resource grants for a project period of one year. It is expected that from 35 to 40 awards will be made in Fiscal Year 1990. The number of grants and the specific amount of awards will depend on the merit and scope of the applications received, as well as the availability of funds. All policies and requirements which govern the grant programs of the PHS apply.

TERMS OF AWARD

Institutions may request major equipment items for their animal resources as well as funds for A&R. Support for new construction is not authorized. The total award is limited to a maximum of $700,000 from this grant program. Within this, there is no limit on the equipment request but the request for A&R is limited to $500,000. Equal matching funds from non-Federal sources are required for all A&R as well as equipment. Funds awarded for A&R may not be obligated until final architectural drawings, specifications, and updated cost estimates are received and approved by the Division of Research Resources.

INQUIRIES

A copy of the complete RFA, which describes the research goals and scope, terms and conditions, review procedures and criteria, and method of applying, may be obtained by contacting the Animal Resources Program, DRR:

Leslie P. Bullock, D.V.M., Director
Laboratory Animal Sciences Program
Animal Resources Program Branch
Division of Research Resources
5333 Westbard Avenue, Room 853
Bethesda, Maryland 20892
Telephone: (301) 496-5175

This program is described in the Catalog of Federal Domestic Assistance No. 13.306, Laboratory Animal Sciences Primate Research. Awards will be made under the authority of the Public Health Service Act, Title III, Section 301 (Public Law 78-410, as amended; 42 USC 241) and administered under PHS grant policies and Federal Regulations 42 CFR Part 52 and 45 CFR Part 74. This program is not subject to the intergovern-mental review of Executive Order 12372 or Health Systems Agency review.

EPIZOOTIOLOGY AND TRANSMISSION OF LYME BORRELIOSIS

P.T. 34; K.W. 0785055, 0715125, 0715010, 1002027

National Institute of Allergy and Infectious Diseases

Application Receipt Dates: February 1, June 1 and October 1

I. PURPOSE

The National Institute of Allergy and Infectious Diseases (NIAID) invites applications for research grants to study epizootiology and transmission of Lyme borreliosis to advance the understanding of how the spread of this disease into non-endemic areas can be prevented and how prevalence and transmission in endemic areas can be controlled and reduced.

II. DISCIPLINES AND EXPERTISE

This is a complex problem that will require a multidisciplinary approach. Investigators responding to this announcement will be expected to possess expertise in at least one of the following disciplines: medical entomology, bacteriology, field biology, epidemiology, or molecular biology.

III. BACKGROUND

Lyme borreliosis is the most common vector-borne disease of bacterial etiology in the United States and Europe. In New York, over two thousand cases were reported in 1988. The incidence of Lyme borreliosis in the U.S. in 1988 can be conservatively estimated to be at least seven to ten thousand cases, occurring in at least thirty-five states.

The etiologic agent of Lyme borreliosis is a spirochete, Borrelia burgdorferi. Although the etiologic agent has been isolated and cultured in the laboratory, and is exquisitely sensitive to antibiotics in vitro, Lyme borreliosis has proven to be a difficult bacterial infection to diagnose and treat.

There is no one clinical presentation or progression of symptoms common to Lyme borreliosis as it occurs in the general patient population. The host response is highly variable. Some individuals respond to infection with strong immune responses whereas others may remain seronegative. The organism is very difficult to detect in infected individuals, if it can be detected at all. Published descriptions of the disease, indicating that the hallmark of the disease is erythema migrans followed by secondary and tertiary stages if untreated, often are misleading. The signs and symptoms presented by infected individuals actually are highly variable from one case to another. The symptoms may be easily confused with other diseases some of which may be more serious and have very poor prognoses.

The disease is primarily transmitted to humans and other animals by one or more species of ticks. Transmission may also occur via other vectors or by direct contact with fluids from infected animals. Transplacental transmission with severe consequences to the fetus is known to occur. Many warm blooded animals apparently possess the potential to serve as reservoirs for the etiologic agent. Rodents appear to be the most important reservoir. However, other warm-blooded animals may contribute in significant ways to the spread of the disease to new locations or to increase of human disease in an endemic area. Ixodid ticks are recognized as the arthropod vectors for the disease. However, we know little concerning the potential for alternate vectors.

IV. RESEARCH OBJECTIVES AND SCOPE

Research project applications addressing the following problems are of particular interest to NIAID:

- Define the vectors of B. burgdorferi. Presence of competent vectors in non-endemic areas. Identification of non-ixodid ticks, or insects such as fleas and mosquitos, that may act as potential vectors.
- How B. burgdorferi interacts with the arthropod vector. Characterization of B. burgdorferi antigens expressed in vectors and the vector products associated with spirochete surface.
- Define reservoirs for B. burgdorferi and assess their potential significance for spread of human infection.

- o Differences between B. burgdorferi isolates from different parts of the world.

- o Presence of B. burgdorferi in certain reservoir species as a sentinel to predict outbreak of human disease in previously non-endemic areas.

- o Factors that affect the major vector and reservoir populations and carriage of B. burgdorferi.

- o Control of vector and/or reservoir species and its effect on incidence of human disease.

Several of the above areas may be included in applications. Applicants are also encouraged to consider other avenues of investigation that would be appropriate to the spirit of the goals of this announcement as well.

V. MECHANISMS OF SUPPORT AND REVIEW PROCEDURE

Applications considered appropriate responses to this announcement are the traditional research project grant (R01 and R29). Use the specific application kit (PHS Form 398 rev. 9/86) required in this connection which is available in the business or grants and contracts offices of most academic and research institutions or may be obtained from:

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

Applications in response to this announcement will be reviewed in competition with other applications and in accordance with the usual National Institutes of Health peer review procedures. The initial review for scientific and technical merit will be made by an appropriate study section of the Division of Research Grants, NIH; secondary review will be by an appropriate National Advisory Council. Funding decisions will be based upon relative scientific merit, program relevance, and the availability of appropriated funds.

VI. APPLICATION PROCEDURE

Application receipt dates are February 1, June 1 and October 1.

On the first (face) page, item 2, of the application, the word "Yes" should be checked and the phrase "EPIZOOTIOLOGY AND TRANSMISSION OF LYME BORRELIOSIS" should be typed in the space provided.

The original and six copies of the application should be sent or delivered to:

Application Receipt Office
Division of Research Grants
National Institutes of Health
Westwood Building, Room 240
Bethesda, Maryland 20892**

VII. STAFF CONTACT

Investigators are encouraged to contact:

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