

Request for Applications

Innovative Research to Reduce Health Disparities and Advance Health Equity in Diabetes

Background: According to the U.S. Department of Health and Human Services, health disparities are defined as: *differences in health that are closely linked with social or economic disadvantage*. Health disparities adversely affect groups of people who have systematically experienced greater social and/or economic obstacles to health based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory, or physical disability; sexual orientation; geographic location; or other characteristics historically linked to discrimination or exclusion.

Goal: The American Diabetes Association seeks to provide critical funding toward innovative transformational and translatable research with significant potential to reduce health disparities and advance health equity in the lives of people living with diabetes and its complications.

Scope: For this funding opportunity, attention must focus on, and all hypotheses should reflect, the impact of race/ethnicity, socioeconomic status, health care access, and/or other direct factors that underlie diabetes health disparities, and describe how results will transform assessment and treatment of underserved groups and address significantly improved outcomes in diabetes or its complications. We encourage formative research, intervention development, and/or pilot-testing of interventions. For the purposes of this RFA, we encourage interventions that include behavioral, social, or structural approaches, as well as combination biomedical and behavioral approaches that prevent and/or improve clinical outcomes for persons living with diabetes or its complications.

Importantly, applicants should clearly indicate how the proposed research, if successful, will have a significant impact (“move the needle”) the development, dissemination, or implementation of innovative and effective interventions and/or strategies that reduce health disparities and advance health equity in diabetes.

Applications that do not directly address the defined scope of the RFA will be triaged and not move forward to peer review.

High-level priorities:

1. Clinical investigations aimed at defining the optimal therapeutic approaches or studies identifying the effect of treatment approaches to address of diabetes or its related complications.
2. Studies to improve effective strategies to improve health care delivery for persons with diabetes or its related complications, including the development of improved clinical decision support tools.
3. Studies investigating social, behavioral, or built environment on diabetes prevention or control. Dissemination and implementation studies in health care systems or marginalized populations and structural inequalities

Application procedure: Application instructions, the link to our online application portal and applicable forms are available on the [grants page](#) of the ADA website.



Review Criteria: Applications will be evaluated on the potential of the research, if successful, to have a major impact on the development, dissemination or implementation of effective interventions or strategies that reduce health disparities and advance health equity in diabetes. Alignment with the goals of the RFA, degree of innovation and scientific rigor are key considerations. Relevant experience of the Principal Investigator, availability of the appropriate facilities and resources, the ability of the investigator/site to recruit the patient population, access to, and availability of, data sources, samples and study medications (if applicable) and for fellowships, relevant experience and training history of the Mentor, are also pertinent. The specific timeline for progress of enrollment, data analyses and/or other major project milestones and an appropriate budget allowing for the completion of the proposed work need to be stated.

Only Postdoctoral Fellowship (PDF) applications that are moved to full review will receive reviewer critiques, which will be sent within 1 month of final notification. This applies to both funded and unfunded submissions.

For all other award mechanisms (Junior Faculty Development, Innovative Basic Science, Innovative Clinical/Translational Science): Only LOIs invited to submit a full application will receive reviewer critiques, which will be sent within 1 month of final notification. This applies to both funded and unfunded submissions.

All applications must be submitted through our online grant portal. Please visit the ADA Research Programs website at <https://professional.diabetes.org/content-page/current-funding-opportunities> for full program details and application instructions for each grant type.

Questions about this request for applications should be addressed to:
grantquestions@diabetes.org



OPEN WINDOW AND DEADLINES:

AWARD TYPE	OPEN DATE	SUBMISSION DEADLINE	AWARD START DATE
TRAINING			
Postdoctoral Fellowship	<ul style="list-style-type: none"> May 16, 2022 	<ul style="list-style-type: none"> June 27, 2022, 5PM ET (LOI not required) 	September 1, 2022
DEVELOPMENT			
Junior Faculty	<ul style="list-style-type: none"> Letter of Interest (LOI): May 16, 2022 Invitation to apply from ADA: July 18, 2022 	<ul style="list-style-type: none"> LOI: June 27, 2022, 5pm ET Grant application: August 29, 2022, 5pm ET 	November 15, 2022
RESEARCH			
Innovative Clinical or Translational Science	<ul style="list-style-type: none"> Letter of Interest (LOI): May 16, 2022 Invitation to apply from ADA: July 18, 2022 	<ul style="list-style-type: none"> LOI: June 27, 2022, 5pm ET Grant application: August 29, 2022, 5pm ET 	November 15, 2022

AWARD MECHANISMS

AWARD	AWARD TERM	APPLICANT	ELIGIBILITY	MAXIMUM FUNDING	SUPPORT	INDIRECT SUPPORT
TRAINING						
Postdoctoral Fellowship	Up to 3 years	Postdoctoral Fellow	MD, MD/PhD, PhD, DVM with confirmed postdoctoral position by award start date	\$54,835–\$65,598/year salary stipend, plus \$5K/year research allowance	Salary support, plus allowances for training & fringe / health insurance	\$5K/year fringe & health insurance
DEVELOPMENT						
Junior Faculty	Up to 3 years, contingent on previous career development award funding (NIH K, etc.)	Faculty up to & including Asst Prof or equiv.	Junior faculty in independent position, <10 years research training following terminal degree, pre-R01, no concurrent career development support	\$138,000/year plus student loan repayment (\$10k/yr)	Project support & PI salary up to \$75K (excludes fringe)	Up to 10% directs
RESEARCH						
Innovative Clinical or Translational Science	Up to 3 years	Any level faculty	New & established PIs with <\$500K current research support	\$200,000/year	Project support & PI salary up to 20% total cost	Up to 10% directs

** The ADA's Grants Program aligns with NIH's Stipend Standards for any given year. The ADA will adjust and communicate any changes prior to award distribution, as needed.*