Child Health Collaborative Grant Program

A collaboration among the Clinical and Translational Science Institute and the Department of Pediatrics at the University of Minnesota, Children's Hospitals and Clinics of Minnesota, and Hennepin Health

University of Minnesota/CHILDREN'S MINNESOTA CHILD HEALTH COLLABORATIVE GRANT PROGRAM

2022-23 Request for Applications October 31, 2022

The University of Minnesota (University) Clinical and Translational Science Institute (CTSI), in partnership with the University Department of Pediatrics, Children's Hospitals and Clinics of Minnesota, and Hennepin Health, is pleased to announce the 2022-23 Child Health Collaborative Grant Award Request for Applications (RFA).

This grant is designed to support a collaborative project that addresses an important and unmet child health issue within communities across Minnesota. Our vision is to enable and support engaged scholarship that is co-developed by Children's Minnesota and University. The long-term goal of this program is innovation that connects the development of evidence-based health improvement strategies with the translation of those strategies into improved health outcomes for children and adolescents throughout Minnesota and the nation.

With this RFA, we encourage applicants to develop rigorous scientific projects that promote collaborations across health systems focused on the care of children in Minnesota. Proposals should represent novel, high-impact research or inquiry into issues that affect child or adolescent health. Proposed projects should outline the potential for developing into long-term research and evaluation projects that will attract larger grants from NIH or other federal, state, or private funding agencies. The committee wishes to draw particular attention to the following topics that are timely and important in our communities:

1. Applications focused on racism, health disparities and/or the social and behavioral determinants of health are strongly encouraged. As outlined in a policy statement in 2019 from the American Academy of Pediatrics, the COVID-19 pandemic has done nothing to mitigate this concern; indeed, it made these issues even more obvious. Racism is a social determinant of health that has a profound impact on the health status of children, adolescents, emerging adults, and their families. The evidence that demonstrates the ongoing negative impact of racism on child health and well-being through implicit and explicit biases, institutional structures, and interpersonal relationships is clear. In this RFA, we seek proposals that will objectively evaluate the role of racism in child and adolescent development and health outcomes and offer insights into policies and interventions that can address this issue.

Through research that examines the impact of racism in child and adolescent health, our goal is that pediatricians and other pediatric health can develop novel strategies to optimize clinical care, systems engagement, and quality improvement that will improve the health and well-being of children.

2. Applications related to childhood mental health are strongly encouraged. As Minnesotans emerge from over 2 full years of the COVID-19 pandemic, mental illness and the demand for psychological services are at all-time highs. For children, changes during the pandemic brought on by remote learning, family separation, child abuse and neglect, the opioid crisis, and the chronic, persistent effects of SARS-CoV-2 infection ("long COVID") are contributing factors. Prior to the COVID-19 pandemic,

CDC data found 1 in 5 children had a mental disorder

(https://www.cdc.gov/childrensmentalhealth/access.html), but only about 20% of those children received needed care from a mental health provider. In a 2020 survey from Lurie Children's Hospital in Chicago, 71% of parents said the pandemic had taken a toll on their child's mental health, and 69% said the pandemic was the worst thing to happen to their child

(https://www.luriechildrens.org/en/blog/childrens-mental-health-pandemic-statistics/). Health disparities further exacerbate the challenges in providing children needed help, since students who may have the greatest need for school-based services, particularly those with lower socioeconomic backgrounds, attend school in districts with lower rates of counselors and school.

To address this need, we encourage proposals that can provide novel insights and solutions for the mental health crisis in Minnesota's children. This can include, but is not limited to, research focusing on the epidemiology of mental health disorders in children and adolescents; causative factors including substance abuse; family fragility, racism and disparities; physiological/biological issues (including "long COVID"); intervention studies including pharmacotherapy studies; and public policy and advocacy initiatives. Particular priority will be given to proposals that generate new knowledge suitable for publication in peer-reviewed journals and provide novel, tangible interventions that can address this unmet need in child health.

Although the two topics listed above are of particular importance to the committee, proposals related to a wide variety of topics will also be considered.

The Collaboration must involve at least two co-Principal Investigators: one from Children's Minnesota, and an investigator from University (including all five campuses). Inclusion of a co-Investigator (can be a co-PI) from the Department of Pediatrics at Hennepin County Medical Center (HCMC; Hennepin Health) is encouraged, as long as the application lists significant contributions (as co-PIs) from both Children's Minnesota and University investigators. Applicants from Children's Minnesota must be either employed or contracted for 0.5 FTE or greater. Applicants from University must be current, full-time faculty members in any track. Proposals must clearly explain the roles and responsibilities of all research team members in the following areas:

- Development of the study hypothesis/aims/design.
- Conduct of the study, including clearly delineated lines of responsibility for completion of study aims.
- Analysis of the study, including articulation of a plan for biostatistical evaluation, power analyses, etc.
- Metrics for data presentation, publications, and future funding plans.
- Plans for scientific and community-based dissemination of findings.

Timeline of Events

Collaborative Grant RFA	Released on October 31, 2022
Full applications (NIH-style format and review by	Due January 27, 2023, 5:00 PM CST
investigators from UMN, Children's Minnesota,	
Hennepin Health). Submit electronically.	
Funding decision	Announced on February 24, 2023
Project Commencement	March 6, 2023

It is anticipated that up to two awards will be funded, with a two-year budget period spanning March 6, 2023 through March 5, 2025. A total budget request of up to \$100,000 will be considered. Funding for the second

year of the proposal will be contingent on submission of a satisfactory progress report covering the first year of the grant. Indirect costs will not be supported. Up to 5% of salary effort may be requested. Please visit the CTSI website for more information.

The Department of Pediatrics has consultative services available in its pre-award program for investigators seeking assistance in planning research projects. Children's Minnesota has a department of Data and Analytics, department of Equity and Inclusion, community advisory boards, and employee resource groups that all can help further support team science and institutional collaboration by assisting with disseminating study findings to our peers, to study participants themselves, and to the broader community who stand to benefit from these research projects and what is learned.

Criteria for full proposal review will include the following components:

- **Investigators:** Is there clear evidence for engagement by all investigators? Is there evidence that co-Pls each will bring creative, independent contributions to the project? Do the investigators demonstrate a track record of previous collaboration, or outline a compelling plan for future collaboration?
- **Environment:** Is there evidence that both institutions are committed to the proposed project? Do letters of support indicate existing infrastructure and resources necessary to support the proposed project?
- **Synergy:** How will the proposed project leverage the respective strengths of the two institutions? What will the collaboration facilitate that neither institution could accomplish acting individually?
- **Innovation:** What innovative methods are proposed that could change the approach to the problem being studied, and/or generate new knowledge that would substantively advance the field in question?
- **Impact:** What is the public health importance for Minnesota children of the problem being addressed, particularly in the key target areas of the RFA related to racism/health disparities and children's mental health? What are the prospects that the work can have an impact on the health problem under investigation? How will study findings be shared with community stakeholders?
- Prospects for scholarship and future: Do the co-Pls express a plan/timeline for scholarly
 publication/presentation of findings? Do the co-Pls outline a plan for future extramural funding for
 continued study/intervention/public health impact of the problem in question (NIH, CDC, Minnesota
 Department of Health, philanthropy, or other sources of support)?

Thank you for considering an application for the 2022-23 Child Health Collaborative Grant Program! Please contact Stuart Winter (stuart.winter@childrensmn.org) or Mark Schleiss (schleiss@umn.edu) with any questions.

Sincerely,

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