



## **COBRE Center on Opioids and Overdose**

### **Special Request for Pilot Project Applications:**

- **Telehealth or Mobile Health Vans to Support Treatment, Recovery, and/or Harm Reduction**
- **Housing and Overdose Risk**

### **Program Description**

The COBRE on Opioids and Overdose aims to increase the quantity and quality of research that aims to address the overdose crisis in Rhode Island. One means of attaining this goal is by identifying and nurturing talented junior investigators and enabling established investigators to pursue a new research line. The Pilot Program supports the COBRE's growth by encouraging additional scholarship in the COBRE's thematic areas and developing potential new COBRE Project Leaders at Rhode Island Hospital.

We particularly welcome projects that are interdisciplinary and cross areas of study within the clinical, bio-behavioral, and social sciences. We aim to enable an investigator(s) to collect preliminary data in support of grant applications for independent external research funding, especially from the NIH. Pilot Project Leads can take advantage of the COBRE community and resource cores to help guide their science and career development.

Pilot Project Leads will have access to the COBRE's four interdisciplinary cores. These cores will provide infrastructure, consultation, and additional support services to ensure the successful career and research development of the funded investigator and help them apply for external funding. The four Cores include Administrative, Data and Research Methods (DRM), Translational and Transformative (T2), and Special Populations (SP).

Interested applicants should submit a one-page project summary/scope of work statement (required), and CV or NIH-formatted Biosketch and Other Support documentation to Heather Wunschel at [hwunschel@lifespan.org](mailto:hwunschel@lifespan.org) for review to ensure the proposed research fits with the mission of the COBRE and the Special RFA Requirements.

**COBRE Faculty** will be available to meet with applicants for pre-application consultation to discuss how to strengthen an application.

### **General Program Requirements**

- Research must be opioid- and/or overdose-related
- The proposed research project should be of 1-year duration

## Specific RFA Requirements

For this RFA, we seek project applications in one of two topic areas:

- 1) Telehealth or mobile health van units for addressing the needs of people who use drugs.
- 2) Housing and overdose risk.

Applications outside the outlined scopes will be considered unresponsive to the RFA and will not be considered.

Priority will be given to proposals which **include** a partnership approach to research that equitably involves participants from the partnered Opioids COBRE and RISD's Center for Complexity strategic design studios, and/or members of the Opioids COBRE community advisory board (CAB) and/or 2019 or 2021 Hackathon team winners in the research process. Further assistance in responding to this priority is available during the pre-application process, please contact Heather at [hwunschel@lifespan.org](mailto:hwunschel@lifespan.org) to arrange a meeting with COBRE staff. Please consult the Opioids COBRE website ([www.opioidcobre.org](http://www.opioidcobre.org)) for more information about the strategic design studios, CAB, and past Hackathon winners.

### 1) Pilot Projects examining Telehealth or mobile health van units to support treatment, recovery, and/or harm reduction

Since the onset of COVID-19 in the US, major regulatory developments have occurred that have decreased barriers to accessing telehealth for people who use drugs (PWUD). Telehealth, or telemedicine, enables the remote provision of healthcare to patients via videoconferencing platforms or by telephone. At the same time, mobile health van units have expanded as a strategy to provide greater access to diverse and hard to reach communities. As the healthcare system deals with the ongoing pandemic, expanded telehealth and mobile health van unit supports are crucial to reducing disease transmission while ensuring continuity of care for vulnerable populations.

For PWUD, telehealth and mobile health van units may represent potentially effective alternatives to traditional in-person or stationary treatment models, and an opportunity to reduce the negative impacts of social isolation and improve health outcomes. Although the availability of these innovations has grown, such services are underutilized and understudied for people who use drugs.

***For this special RFA,*** we seek proposals that explore the topics of telehealth/telemedicine or mobile health van units in substance use treatment, recovery, and/or harm reduction. We especially encourage projects that explore research questions in one or more of the following areas:

- Projects that design telehealth and/or mobile health van unit innovations for PWUD and assess their acceptability/feasibility.
- Projects that evaluate telehealth and/or mobile health van unit innovations for PWUD and identify barriers and facilitators to implementation and accessibility.
- Projects that analyze the cost or cost effectiveness of telehealth and/or mobile health van unit innovations among PWUD.
- Projects that evaluate disparities in accessing telehealth and/or mobile health van unit innovations for PWUD.
- Projects that focus on sustainability and replicability of telehealth and/or mobile health van unit innovations for PWUD.
- Projects that focus on methodologies that advance our understanding of telehealth and/or mobile health van unit approaches for PWUD.

## 2) Pilot Projects examining Housing and overdose risk

The United States is continuing to experience converging crises of homelessness and drug overdose morbidity and mortality, made worse by the ongoing COVID-19 pandemic and an unregulated, toxic drug supply. Prior to the pandemic, the number of people unhoused or living in shelters totaled nearly 600,000, though this number has likely grown and underestimates the true scale of the problem (HUD, 2020). For this population, drug overdose is a leading cause of death (Doran, Fockele, & Maguire, 2022), underscoring the need for novel housing support models that meet people where they are, grounded in evidence-based harm reduction principles. The increased risk of overdose in certain housing environments is also notable, and research to better understand mechanisms of overdose risk, impacts of housing policies, recovery housing policies, and how other structural factors such as type of housing and configuration of housing units influence risk warrant further study.

Despite the urgency of these issues, available housing options are not designed to support people who use drugs, often leading them to use alone, thus increasing their risk of fatal overdose. Structural inequities and discrimination in housing are also common and exacerbate health risks for marginalized groups.

***For this special RFA***, we seek proposals that identify housing related-risk factors or evaluate innovative and integrative approaches to housing that affect overdose risk. We encourage projects that explore research questions in one or more of the following areas:

- Projects that identify, catalog or quantify housing related risk factors for overdose (e.g., housing policies, eviction, cost-burden, housing design, etc.).
- Projects that advance or develop new datasets or methodologies for examining housing and overdose risk.
- Projects that create innovative housing intervention models or policies that may impact overdose and assess their acceptability/feasibility.
- Projects that evaluate innovative housing and overdose response models and identify barriers/facilitators to successful implementation.
- Projects that address how racial and ethnic inequities and discrimination in housing affect overdose risk.

Projects that design and assess the feasibility of housing models that incorporate overdose response interventions.

### **Award Budget**

Successful applicants will receive up to \$40,000 in direct costs for a single-investigator, one year project or \$60,000 in direct costs for a multi-disciplinary-investigator, one year project. Pilot projects will also receive access to Center resources for professional development and project support.

### **Application Submission Process**

We recognize that researchers might be interested in entering this area of research but may have a limited research background or community partnerships necessary to propose a specific project. In this case, we invite researchers to contact us, and we can assist in both suggesting possible research topics and/or introducing applicants to other researchers or community partners.

## **Letter of Intent**

All applicants must submit a Letter of Intent to Heather Wunschel at [hwunschel@lifespan.org](mailto:hwunschel@lifespan.org) with a subject line of "COBRE Pilot Project LOI" **by 5:00 pm on March 25, 2022**. Late submissions will not be accepted. Please prepare a single pdf document that includes the following documents:

- Title page including: your name and degrees, contact information including preferred email and telephone number, affiliation, home department, mentor and their affiliation and home department.
- One-page summary/scope statement of your proposed project or idea, including a statement related to your vision for Center and community involvement
- CV and/or Biosketch
- Other support documentation if available

Letters will be reviewed to ensure eligibility and that the proposed research is responsive to this special RFA and the mission of the COBRE. Selected applicants will be invited to submit a full project proposal.

## **Special Considerations, Institutional Approvals, Eligibility, and Reporting**

### **Award Budget and Use of Funds**

Application budgets may not exceed \$40,000 or \$60,000 (see above) in direct costs. Current pilot funds are being contributed by partner institutions and units, rather than NIH, and these institutionally designated awards do not include indirect costs (F&A).

Faculty effort can be supported. Student/post-doctoral stipend is not allowed but student/doctoral salary wages are permissible. Wages for technical personnel are permissible. Equipment (>\$1,000 per item) is not allowed. Renovation and/or honorariums are not allowed. Travel to locations outside of the US, Puerto Rico, and Canada is not allowed.

Provided all regulatory approvals (IRB, IACUC, EAC, NIGMS) have been obtained, funding will likely be made available to your institution on [insert date].

Unused funds must be transferred back to the COBRE. Pilot Awards are NOT transferable to institutions outside of Rhode Island. If the Principal Investigator transfers to a non-eligible institution, the remaining pilot project grant funds will be transferred back to the COBRE. Carry Forward of unobligated balance is not allowable.

### **Regulatory Approvals**

If your project includes human subjects or vertebrate animals, your institutional IRB or IACUC (respectively) approval is required before funds can be released. Protocols must be submitted to IRB for approval within 30 days of notification of funding and final approval sent to the Center within 90 days.

### **Eligibility**

Faculty investigators at any rank are allowed to lead Pilot Projects, however, junior investigators with tenure-, research-, or clinical-track faculty appointments will be given priority. The research Pilot Project

Leader must be employed in Rhode Island. Postdoctoral fellows or other positions that do not carry independent faculty status at the applicant institution will disqualify that individual and his/her research project from further consideration, unless evidence is provided that a faculty appointment is forthcoming.

The intent of this FOA is to support and develop promising investigators whose early career support consists of awards geared toward initiating their intended area of research. Each Pilot Project Lead should indicate in his/her Biographical Sketch their current and previous history of peer-reviewed research support.

Because the pilot project funds derive, in part, from our NIGMS-funded COBRE, awarding of a COBRE-funded Pilot Project will require one to relinquish any other NIGMS sponsored NIGMS IDeA programmatic funding.

Foreign components are not allowed.

For more information on eligibility, contact Heather Wunschel at [hwunschel@lifespan.org](mailto:hwunschel@lifespan.org).

### **Special Considerations**

While the best science will be prioritized and the ability of the investigator to contribute to and meet the goals of the Center, special consideration will be given to those investigators who (in no particular order):

1. Meet the requirements of the special RFA.
2. Have a multi-disciplinary approach with consideration to community, community organizations and previous COBRE Hackathon and feasibility studies.
3. Are RI Hospital based faculty.
4. Employ use of COBRE Core services.
5. Are underrepresented populations in the US Biomedical, Clinical, Behavioral and Social Sciences Research Enterprise.
  - A. Individuals from racial and ethnic groups that have been shown by the National Science Foundation to be underrepresented in health-related sciences on a national basis (see data at <http://www.nsf.gov/statistics/showpub.cfm?TopID=2&SubID=27>) and the report Women, Minorities, and Persons with Disabilities in Science and Engineering).
  - B. Individuals with disabilities, who are defined as those with a physical or mental impairment that substantially limits one or more major life activities, as described in the Americans with Disabilities Act of 1990, as amended.
  - C. Individuals from disadvantaged backgrounds (See NOT-OD-20-031 for additional information).
  - D. Women and women from the above backgrounds (categories A, B, and C).

### **Additional Requirements**

Pilot project grant recipients must participate in Center Enhancement and Programmatic Activities. Pilot recipients will be required to provide project updates, during the COBRE Project Meetings which occur each month and attend and present at the COBRE symposium, annual retreat and the IDeA Regional meeting. Pilot recipients must submit written quarterly and annual progress reports.

Pilot project recipients are required to Acknowledge sponsorship from the COBRE on Opioids and Overdose supported by the grant in all research publications and presentations during the performance period. Future publications related to this research must also acknowledge COBRE sponsorship.

**Contact**

Address inquiries regarding the COBRE on Opioids and Overdose Pilot Project Award to [hwunschel@lifespan.org](mailto:hwunschel@lifespan.org).