



University of Washington / Fred Hutch Center for AIDS Research (CFAR)

2024 Request for Applications (RFA) The Stephaun Elite Wallace Community Investigator Award

	DEADLINES
RFA Release Date	April 1, 2024
<u>Key Pre-Submission Items:</u>	
REQUIRED Non-Binding Letter of Intent Form (includes eligibility check details)	May 30, 2024
Mentor Match Finalized	June 30, 2024
Consultation Appointments Window Open:	June 15, 2024
<ul style="list-style-type: none"> ○ REQUIRED: Data Science & Methods Core Consultation ○ REQUIRED: Office of Community Engagement Consultation ○ REQUIRED: Budget Consultation ○ OPTIONAL: Other Core/Scientific Working Group 	
Deadline for Consultation Requests	August 31, 2024
Data Science & Methods, Budget, Office of Community Engagement Feedback Window Ends	October 3, 2024
Application Deadline	November 1, 2024
Review	January 2025
Estimated Earliest Award Date	January 15, 2025
Award Period	January 2025 – December 2027

Please read the entire RFA for detailed instructions.

The Stephaun Elite Wallace Community Investigator Awards (Wallace Awards)

A. OVERVIEW

Purpose

The purpose of the UW/Fred Hutch Center for AIDS Research (CFAR)'s Stephaun Elite Wallace Community Investigator Awards (referred to as the Wallace Awards) are to grow capacity for community-led HIV research with funding, mentoring and educational support for community leaders. The Wallace Awards are also intended to facilitate community-based organization (CBO)-CFAR member connections and collaborations.

This award honors the founding Director of the UW/Fred Hutch CFAR Office of Community Engagement (OCE), Dr. Stephaun Elite Wallace. Dr. Wallace was a scientist, social justice advocate, leader in the LBGTQIA+ Ballroom community, and champion of community-led research. This award would not be possible without the staunch advocacy and vision of Dr. Wallace.

The Wallace Awards are led by the OCE, with the CFAR Developmental Core providing operational support and funding of \$5,000-\$20,000 per award for 1-2 years. Project awards will scale proportional to the complexity and duration of the proposed work.

Projects should contribute to advancing the CFAR's overall mission of advancing knowledge in clinical, epidemiology, pathogenesis, treatment, and prevention of HIV and comorbidities. Projects may be traditional or non-traditional research (see "Types of Projects" below).

The awardees of a Wallace Award will be offered prioritized consideration for CFAR training opportunities. Wallace Award recipients will also be afforded access to UW/Fred Hutch CFAR resources, including the UW library system, public health-focused workshops/webinars, and select courses taught by CFAR researchers while completing their projects.

Applicant Eligibility

Eligible applicants must be actively involved in and have a strong commitment to community-based HIV work in Washington State as either a leader, staff member, volunteer, or research collaborator of a community-based organization. Eligible applicants must be employees of the organization receiving Wallace Award funding or have long-standing relationship with that organization. Individuals whose primary professional affiliation is with the University of Washington, Fred Hutch, or other affiliated academic institutions are not eligible.

Eligible applicants include those with a high school diploma/GED or some college experience (including associate and bachelor's degrees), associate degrees, relevant professional certifications, bachelor's and master's degrees. Applicants with terminal degrees (MDs, PhDs, JDs) are not eligible. Current HIV investigators are also ineligible.

UW/Fred Hutch CFAR values diversity and encourages individuals from [underrepresented groups](#) to apply.

Applicants may submit only one application to this program per cycle.

Contact cfaroce@uw.edu if you have questions about eligibility.

Types of Projects

There are two kinds of projects that can be accepted for this award, defined broadly as traditional research projects and nontraditional research projects.

In scientific inquiry, we often distinguish between traditional research projects and their nontraditional counterparts. While traditional research projects conform to conventional methodologies and topics within a discipline, nontraditional research projects venture into areas less recognized but intrinsically connected to the overarching aims of HIV research.

Traditional research projects in the realm of HIV research are typically characterized by their focus on biomedical investigations, basic science, clinical, epidemiological, behavioral and implementation science research. These endeavors are aimed at understanding the pathophysiology of HIV, developing new treatments, vaccines, or cures, and studying the virus's transmission dynamics.

A nontraditional HIV research project may not be immediately identifiable as typical "research," yet it:

- Contributes to the overall knowledge and understanding of HIV science and/or service implementation.
- Offers vital support to both HIV research initiatives, researchers, or research participants themselves.
- Enhances the capacity for conducting HIV-related research or establishing collaborative efforts.
- Expands the scope of who is involved in conducting research, notably incorporating members from unrepresented communities affected by HIV.
- Prioritizes the interests and issues critical to the community.

Examples of Research Projects

The HIV-related research projects funded under this award can take various forms, such as:

- Enhancing PrEP/TasP uptake in priority populations
- Uncovering factors that can increase HIV testing
- Understanding and developing tools to address HIV vaccine hesitancy;
- Communicating about HIV cure research priorities and methods;
- Assessing the need and design for low barrier care models;
- Increasing capacity for community engagement and related projects;
- Providing training to researchers to liaise between the community and the research community;
- Simplifying complex scholarly articles for broader public comprehension;
- Organizing workshops that equip individuals with essential research skills;
- Understanding facilitators/barriers to medication adherence;
- Strengthening patient-provider relationships to increase health outcomes;
- Evaluating programs to determine their effectiveness and impact;
- Disseminating research findings or updates from recent conferences;
- Creating community-friendly research materials or social media platforms;
- Executing community surveys, focus groups, or qualitative interviews to gather first-hand data;
- Innovating with new technologies, for instance, developing applications or chatbots to facilitate research processes;
- Hosting research-related events with community, policy makers, health agencies and researchers;
- Authoring conference abstracts submitted and presented, or manuscripts submitted and presented.

Nontraditional research projects hold significant promise for redressing imbalances within the realms of equity—be it racial, gender, or socioeconomic—and representation in HIV investigation. These

innovative approaches serve as powerful tools to mitigate HIV disparities observed in healthcare, medicine, and public health. By broadening the spectrum of researchers and engaging diverse communities, nontraditional research projects not only may enrich the field of HIV research but also may amplify its relevance and reach.

Additional Considerations

1. We can only accept applications related to the [NIH's HIV research high or medium priority areas](#). Please contact cfaroce@uw.edu with questions about whether your proposal qualifies. Also, please review the additional guidelines below.
2. **Projects that cannot be funded through the CFAR include:**
 - a. Any clinical trial ([NIH definition of a clinical trial](#)). If unsure, please discuss with your CFAR mentor.
 - b. Studies involving new drugs, treatments, or devices
 - c. Activities such as lobbying and political actions
3. **Projects that can be funded via CFAR but require additional NIH review if selected for an award. Please note that this review can take several months to complete, delaying the project start.**
 - a. Studies involving **new ways of using known drugs, treatments, or devices** (allowed on a case-by-case basis)
 - b. Studies that are deemed **above minimal risk** by the Institutional IRB
 - c. Studies involving [vulnerable populations](#)
 - d. Studies with populations with additional considerations for **confidentiality and safety** (transgender, sex workers, refugees, etc.)
 - e. Studies involving **behavioral interventions** (above minimal risk)
4. **Projects that do not require additional NIH review**

Research activities that do not include vulnerable populations (see Category 3.c. above) and present **no more than minimal risk** to human participants as described in the [OHRP Expedited Review Categories](#). Examples include but are not limited to the following:

 - a. Routine blood draws
 - b. Non-invasive procedures routinely employed in clinical practice (e.g. ultrasound, MRI)
 - c. Surveys, focus groups

Mentoring

To achieve the Wallace Awards' goal of growing capacity for local community-led HIV research, an important hallmark of the program is that community investigators will receive mentoring from academic researchers in preparing and executing their proposal. We view mentorship as non-hierarchical shared learning that is guided by the needs of the mentee. The CFAR OCE and Developmental Core will assist applicants in identifying a mentor for their project, based on information submitted by the community investigator in their interest form (including goals of the proposed project, mentorship areas, and mentor preferences identified by the community investigator). Community investigators are also welcome to identify their own mentor, with approval from the CFAR OCE and Developmental Core. Mentors must be appointed at a US-based affiliate of the UW/Fred Hutch CFAR [University of Washington, Fred Hutch, Seattle Children's, Access to Advanced Health Institute, University of Hawai'i at Mānoa].

The primary mentor is expected to meet with the community investigator throughout the application process and give substantive input on the application, as well as provide mentorship and support throughout the project. Each Wallace Award submission must include a letter of support from the applicant's primary CFAR-appointed mentor. In addition to this mentor, a CBO-based mentor at the organization where the work will be conducted is strongly encouraged.

Additional mentors may be identified prior to submission. Mentors must provide a letter of support stating they have read and discussed the proposal with the applicant as part of the full application. The CFAR can provide resources to support the mentoring relationship throughout the project, including providing example mentoring agreements. The CFAR will also aim to provide successful awardees with professional development and capacity-building opportunities to further their success.

Funding Available

Awards will be \$5,000-\$20,000 total (direct costs) per year for 1 to 2-year projects. Project awards will scale proportional to the complexity and duration of the proposed work.

Budget Development Guidelines and Restrictions

Part of the pre-submission process is to complete a budget consultation, where applicants will be able to consult with CFAR staff on their draft budget proposals. A budget template is provided in the consultation request form (see pre-submission section below).

Please note the following regarding institutional indirect (Facilities & Administrative, or “F&A”) costs. Applicants whose employer has an agreement to define their F&A rates should include that rate (and applicable indirect costs) in their budget. Applicants whose employers do not have an F&A agreement should use a standard 10% rate for indirect costs unless the organization has a documented way of determining indirect costs. Requested support for project collaborators who are NOT at the same organization as the awardee should be listed as consultant costs. If the collaborator cannot accept consultancy fees, a subcontract must be issued to their organization. These costs must be listed in the detailed budget as consortium costs with applicable indirect costs included, which will count towards the direct costs limit.

1. Requested support for equipment and technology, including computers, must be fully justified in the budget justification with a clear connection to the scientific aspects of the project and not for general office use. Be sure to read our [Computer Policy](#) if you would like to budget for a computer. General office supplies are not allowed.
2. Tuition, fees and stipends for graduate and undergraduate students are allowable within the following NIH guidelines for total compensation: [NOT-OD-23-076](#)
3. Costs associated with Institutional Review Board (IRB) review of human research protocols, or Institutional Animal Care and Use Committee (IACUC) review of animal research protocols, are not allowable as direct charges.
4. All costs must conform to the NIH Grants Policy Statement (GPS) and applicable U.S. Office of Management and Budget OMB circulars for necessity and reasonability, allocability, conformance and consistency, as well as allowability. Please follow the link below to section 7.2 cost principles section of the [NIH Grants Policy Statement](#) for more information.

Other Information

Human Participants IRB Approvals: Copies of all Institutional Review Board (IRB) approvals (if applicable to the project) are not required before *submitting* an application, but they must be forwarded to the CFAR Developmental Core (cfardev@uw.edu), *prior to receipt of award funding*.

B. PRE-SUBMISSION PROCESS

Required Items: Letter of Intent (online form), 3 pre-submission consultations

- **Submit a Letter of Intent Form (online):** Complete the non-binding [2024 CFAR Stephaun Elite Wallace Award Letter of Intent \(LOI\) Form](#) by **MAY 30, 2024**. We use this to link applicants with mentors, provide support to applicants, and line up reviewers with appropriate expertise. You will need to provide the following details.
 1. Applicant Name, Organization and Contact Details
 2. Are you an employee of the above organization?
 - a. If not, how long and in what capacity have you been engaged with this organization?
 3. Highest level of education (select one: High school/GED, Associate, Bachelor's, Master's)
 4. What is your role in community-based HIV work in Washington State? Please be specific about the type of work you do and your role in it.
 5. Draft Project Summary in Plain Language (1 paragraph)
 6. What are the key populations you seek to engage through your project?
 7. Have you already identified a CFAR-affiliated mentor?
 - If yes, Name(s)/Organization(s) of Project Mentor(s)
 - If not, we can help identify a mentor based on your project area. Please provide the following information to help us find a mentor for you:
 - Is there expertise or experience working with certain populations that you want your mentor to have?
 - Is there anything else we should know about your mentor preferences?
 - Upload an up-to-date resume or curriculum vitae (CV).

Note: All applicants are strongly encouraged to review our Applicant Eligibility requirements closely. Ineligible applicants are disqualified automatically. Please await confirmation of your eligibility from the CFAR Office of Community Engagement before requesting pre-submission consultation slots reserved for Wallace Award applicants.

Schedule Three Pre-Submission Consultations (Office of Community Engagement, Data Science and Methods, Budget)

1. **Office of Community Engagement Consultation** The [Office of Community Engagement](#) (OCE) helps to link our researchers with local communities with the goal of ensuring that all people can benefit from scientific advances in prevention, treatment, and cure of HIV. The OCE utilizes a Community Consultative Group (CCG) of experts to provide constructive feedback and technical assistance to investigators on research proposals, grant applications, grant implementation, and research dissemination to effectively impact and engage communities affected by HIV. The value added by OCE consultations may include:
 - Access to perspectives from underrepresented populations affected by HIV
 - Improved feasibility and acceptability of research design, methods, and results
 - Improved application review scoring

All applicants are required to complete the [consultation request form](#) at your soonest opportunity and no later than **August 31, 2024**. Please be prepared to describe 1) the significance of your project to the key populations you seek to engage, and 2) community engagement opportunities, including how you will engage communities in your project.

Upon submission, we will review your request and contact you to schedule your consultation. Feedback will be provided during your 30-minute consultation meeting. Please check **Appendix A for Tips for Optimizing Your OCE Consultation Feedback**.

Please contact cfaroce@uw.edu if you have questions about OCE consultations.

- 2. Data Science and Methods Consultation:** Applicants proposing a project that involves quantitative and/or qualitative research methods are required to discuss their proposal with a CFAR Data Science and Methods Core (DSMC) faculty advisor during the preparation of their proposal. DSMC consultations are best done early in the pre-submission process. Feedback may include recommendations to confer with additional CFAR Core and Scientific Working Group (SWG) experts, and timely CFAR consultation appointment slots are limited.

All applicants are required to complete the [consultation request form](#) by August 31, 2024. We will contact you to confirm whether a DSMC consultation is required for your project and schedule your appointment. *Please be prepared to forward your draft Aims and Methods (research projects) OR project description (non-traditional research projects) to your assigned DSMC faculty advisor at least 48 hours prior to your appointment.*

Please contact cfardev@uw.edu if you have questions about DSMC consultations.

- 3. Budget Consultation:** All applicants are required to upload their draft budget and budget justification to the [consultation request form](#) by **August 31, 2024**, for review. We will contact you by email to provide written feedback on your budget and budget justification and to clarify any related issues. Click [here](#) to download the budget template.

OPTIONAL: Virtual Budget Consultation Appointment: If you would also like to request a live budget consultation, please also email cfardev@uw.edu at your soonest opportunity and no later than **August 31, 2024**. Availability is limited. (NOTE: In some instances, the CFAR Developmental Core may initiate a request to meet with an applicant to clarify budget issues as needed.)

Please contact cfardev@uw.edu if you have questions about budget consultations.

Other Optional Consultations

Behavioral Innovations Core Consultation: Applicants proposing a study involving behavioral innovation research (i.e. use of structural and multilevel models; digital data capture and intervention; behavioral outcomes measurement (including geospatial and social networking data); telePrEP and other telehealth services; health access, equity, and policy) are **strongly encouraged** to obtain a consultation from the Behavioral Innovations Core with regard to methods and study design. To arrange for a behavioral methods consultation, please complete the [Behavioral Innovations Research Consultation Form](#) and email Dr. David Katz (dkatz7@uw.edu), BIC Faculty, and Morgan Aurelio (mca1@uw.edu) BIC Research Coordinator, to flag your Wallace Award-related request within the Core's queue. *Be prepared to send your draft Aims and Methods upon request to your assigned Core advisor.* Requests for Wallace Award consultations should be made no later than **August 31, 2024**, to allow time for completion and integration of feedback into your proposal prior to the **November 1, 2024**, application deadline.

Additional CFAR Core/SWG Consultations: We strongly encourage you to utilize services from additional CFAR Cores and Scientific Working Groups (SWGs) early in the pre-submission process. See the consultation services descriptions in **Appendix B: UW/Fred Hutch CFAR Core/SWG Consultation Services** below for more details and/or visit the CFAR website to [search](#)

[available services](#). Requests for consultations should be made no later than **August 31, 2024**, to allow time for completion and integration of feedback into your proposal prior to the **November 1, 2024** application deadline.

C. GENERAL APPLICATION INSTRUCTIONS

After fulfilling all pre-submission requirements, please complete the [CFAR Wallace Award Application Submission Form](#) by **November 1, 2024 at 11:59pm PT**. Please be prepared to attach the following **required** documents.

1. Completed application form ([click to download MS Word template](#))
2. Detailed budgets for each 12-month period ([click to download template](#))
3. CFAR Mentor's Letter of Support (should include the statement, "**I have read and discussed this application with [applicant name] and am supportive of its submission.**")
4. Other letters of support from additional mentor(s) and any collaborator(s) for the proposed project.

The submission form will also request you complete the **Additional Project Information** and optional **Applicant Demographic Information** sections. We have listed the details requested below so you can prepare your responses in advance.

Additional Project Information Requested

- Applicant contact details
- Primary project mentor name, organization, and email address
- Final project title
- Annual Budget Amounts: Year 1 Direct/Total Costs, Year 2 Direct/Total Costs
- Regulatory Information:
- Does this project involve human participants? (YES, involves human participants/NO, does not involve human participants)
 - If yes, does your study involve procedures or behavioral interventions deemed above minimal risk? (YES/NO)
 - If yes, does your study include vulnerable populations? (Please specify below)
 - Prisoners
 - Refugees
 - Children (up to age 18 years)
 - Pregnant persons, neonates, fetuses
 - Other (please specify): _____

Applicant Demographic Information (Optional)

Gathering and evaluating information about our applicants is the best way for us to measure our progress towards diversity, equity and inclusion (DEI). The information reflects how well this award program is working and will provide reference points for reaching our DEI goals. This data will keep our program accountable and on track for success.

The information you provide is confidential and will not affect consideration of your application or access to services. As part of CFAR's commitment to diversity, equity and inclusion, these prompts enable you to describe yourself as you wish. Additional details are below.

- Gender identity(ies) (Indicate or DECLINE TO STATE)
- Racial category(ies) (Indicate or DECLINE TO STATE)
- Ethnic category(ies) (Indicate or DECLINE TO STATE)
- Meets NIH definition of person with [disability](#)? (YES/ NO/ DECLINE TO STATE)
- Meets NIH definition of person from [disadvantaged background](#)? (YES/ NO/ DECLINE TO STATE)

If you have any questions about the application requirements or submission process, please contact cfaroce@uw.edu.

D. REVIEW CRITERIA

Each of these criteria below will be used to consider applications' strengths and weaknesses to ensure a comprehensive review. For nontraditional projects, attention will be given to the innovative aspects and potential to disrupt existing research conventions.

- **Significance and alignment of the proposal with CFAR priorities** – *What is the likelihood of the project exerting a sustained powerful influence on the field? Does it address an important problem or a critical barrier to progress in the HIV response? Will this proposal be likely to advance the health of the most impacted communities?*
- **Investigator and Team** – *Are the applicant, mentor(s), collaborators, and other researchers well suited to the project? Does this applicant have appropriate experience and training? Will this project support the development of community investigators? If the project is collaborative, do the investigators/mentors/partners have complementary expertise? Will the project team include community-based advisors?*
- **Approach** – *Are the conceptual framework, design methods, and analyses adequately developed, well integrated and appropriate to the project's aims? Does the applicant acknowledge potential problem areas and consider alternatives? Are there clear strategies for managing unexpected outcomes, challenges or risks?*
- **Innovation and Original Thinking** – *Does the project employ novel concepts, approaches, or methods? Are the aims original and innovative? Does the project challenge existing paradigms or develop new methodologies or technologies? How does the proposed innovation reflect the needs and preferences of impacted communities? Does the project demonstrate out-of-the-box thinking?*
- **Community and Stakeholder Participation** – *Is there active participation from the community? From those living with HIV? Has effort been made to extend the project benefits to underserved communities? How is community engaged and empowered? Is the project aimed at reaching and benefiting marginalized or less-represented populations? Does the project design reflect active input from affected individuals and groups? Does the proposal reflect a community-sourced priority?*
- **Collaboration** – *Does the proposal involve cooperation across different disciplines, organizations, or communities? Does it incorporate various perspectives to tackle the challenges facing the HIV response? Do the project's methods cohesively address the*

complexity of HIV/AIDS through a multidisciplinary lens? Does it promote the fusion of expertise from various fields to enrich the HIV response?

Appendix A: Tips for Optimizing Your OCE Consultation Feedback

- Review our [OCE Community Engagement Considerations for Research Proposals](#).
- Consider the [NIEHS Framework for Community-Engaged Research and Citizen Science](#) and these [Models of Community-Engaged Research Proposals](#).
- Draft a project summary for the OCE Consultation Form: Your project summary should include the following information in plain language:
 - Key research questions and why they are important
 - Anticipated key findings
 - How is this related to HIV prevention/treatment/cure?
 - How will this project positively impact the communities that you serve?
- Prepare questions for your OCE consultation: Refer to the table below for examples of topics on which you may request specific feedback.

Type of Project	Suggested OCE Consultation Topics
Research Question Development	Research question consultation: discuss appropriateness and relatedness to the community
Proposal Development	Methods consultation: discuss feasibility, acceptability, consent process, recruitment and retention, dissemination
Project Implementation	Implementation consultation: discuss the development of protocols, educational materials, recruitment and retention, dissemination; Optional: Implementation solutions consultation
Results Dissemination	Results dissemination consultation: discuss strategies to effectively disseminate study findings, with the goal of reaching the priority populations of the study.

- Develop a slide presentation. It is recommended, but not required, to use presentation slides for your OCE consultation. To help you get started, the [OCE Resources](#) page offers a wide variety of additional tools for scientists, including:
 - [Plain Language Slide Template](#) (optional)
 - [Plain Language Summary - Introduction](#)
 - [Sample community-oriented presentation slides](#)
 - [NIAID HIV Language Guide](#)

Appendix B: UW/Fred Hutch CFAR Core/SWG Consultation Services

- [Administrative Core – Office of Community Engagement \(OCE\)](#): Facilitates community-engaged research with the goal of ensuring that all people can benefit from scientific advances in prevention, treatment, and cure of HIV. The OCE utilizes a Community Consultative Group (CCG) of experts to provide constructive feedback and technical assistance to investigators on research proposals, grant applications, grant implementation, and research to effectively impact and engage communities affected by HIV. To arrange for an OCE consultation, please refer to the detailed instructions above (page 5).
- [Behavioral Innovations Core](#): Provides support, knowledge, and skills in diverse contexts at the intersection of behavioral science and digital health to further HIV prevention and care research while addressing health equity, access, ethics, and policy. Applicants proposing a study involving behavioral innovation research should refer to the detailed instructions above to have an expert consult with them regarding their study. To request a consultation, please refer to the detailed instructions above (page 7).
- [Biomarkers, Prevention and Interventions for HIV-associated Malignancies & NCDs Core](#): Provides assays and data instruments to enable studies of HIV-associated malignancies and other non-communicable disease. Applicants proposing a clinical or translational study involving HIV-associated malignancies or other non-communicable disease may contact Manoj Menon (mmenon@fredhutch.org) to have a consultation regarding their study.
- [Clinical and Comorbidity Research Core](#): Provides a central resource for high-quality HIV clinical data, ready access to eligible study participants and biologic specimens, and consultation for investigators conducting clinical, translational, and basic research. Core scientists with expertise in epidemiology, data science, health informatics, biostatistics, clinical medicine, socio-behavioral, basic and translational research provide assistance with study feasibility, design, methods (qualitative, quantitative), statistical analysis, grant preparation, and analytic datasets including adjudicated outcomes (e.g., myocardial infarction, stroke, cancer) and patient-reported outcomes (e.g., current substance use, mental health). We lead and facilitate participation in national ([CNICS](#)) and international ([NA-ACCORD](#)) HIV Cohort Collaborations. To request Core services, please visit our [core webpage](#) and use the link below 'Services'.
- [Data Sciences and Methods Core](#): Provides a central resource for biostatistical and qualitative research expertise to improve the conception, design, and analysis of HIV/AIDS-related studies. Any CFAR investigator can consult with quantitative or qualitative Core scientists for assistance with study planning and design for grant applications (e.g., study design, sample size, and development of analytical plans for NIA, K, or R01 grants), study implementation (e.g., data management, data analysis), and research communication (e.g., drafting of abstracts, posters, or articles). To request a methods consultation for a Wallace Award application, please refer to the instructions under Data Science and Methods Consultation in Section B. For *non*-Wallace Award application requests, please visit our core webpage and complete the [Data Science and Methods Core - Consultation Request Form](#).
- [Developmental Core](#): Provides career development services for UW/Fred Hutch CFAR members with a special focus on funding opportunities, skills training and mentoring support services. In tandem with its sponsored award programs, the Developmental Core offers pre-submission budget consultations to help position applicants for efficient proposal reviews and award releases if funded. To request a budgetary consultation, please refer to the detailed instructions above in Section B.
- [Health Equity SWG](#): Aims to catalyze efforts to investigate and understand the complex social and structural determinants of health disparities and to promote innovative research to attain health equity

and remove sources of unfair health differences among historically marginalized populations. Applicants proposing a study relevant to health equity should contact Roberto Orellana (popolvuh@uw.edu) to have a consultation with them regarding their study.

- [Immunology, Retrovirology, and Cure Core](#): We encourage applicants to contact the IRC Core manager, Tom Andrus (tandrus@fredhutch.org), for projects in any way related to humoral and cellular responses to HIV infection, virology, sequencing assays/analysis, animal/tissue models of HIV infection, HIV cure. Mr. Andrus will facilitate communication with the relevant IRC Core faculty.
- [Implementation Science Core](#): Provides resources to develop implementation science expertise within the CFAR community. Applicants proposing a study in the field of implementation science should request an expert consult regarding their study by completing the Core's online [Request for Consultation](#) form. Contact uwhivishub@uw.edu (cc: cfar@uw.edu) for assistance completing the form as needed. CIA applicants should also email uwhivishub@uw.edu (cc: cfar@uw.edu) in order to flag their CIA-related requests within the Core's queue.
- [Substance Use SWG](#): Supports a multi-disciplinary network of researchers to develop substance use research, receive critical feedback on projects and grants, and cultivate new skills and knowledge related to substance use, particularly those from diverse and underrepresented backgrounds. To arrange for a consultation for substance use-related proposals, contact Judith Tsui (tsuij@uw.edu) and Sara Glick (snglick@uw.edu).
- [Translational Research Subcore](#): The Translational Research Subcore helps investigators perform clinical studies by supporting enrollment of people living with HIV, prospective collections of samples, facilitating use of repository specimens, and assisting with overall study logistics and implementation. Applicants proposing clinical, translational, sociobehavioral or basic research projects that require access to research space, local research participants, and/or clinical specimens/procedures should contact Jordan Graff (jggraff@uw.edu) to have a professional consult with them regarding their study.

Appendix C: Post Award Requirements (if funded)

If the application is a traditional research project, approvals for the involvement of human participants and/or vulnerable populations in a research project are required prior to funding, to be submitted to the Development Core at cfardev@uw.edu:

- (If applicable) a copy of Institutional Review Board (IRB) approval
- If the project involves human participants and falls under a vulnerable population category that requires additional NIH review, the awardee must submit their protocol and consent forms for NIH clinical clearance approval.

Please note that NIH clinical clearance takes several months to obtain all required approvals and therefore applicants should incorporate this into their study timeline.

Reporting and Presentation Requirements: Awardees will be required to submit annual and final progress reports to the CFAR and to make an oral presentation at a CFAR-sponsored event as is appropriate to the project, for example the annual UW STI & HIV Research Symposium or a CFAR Office of Community Engagement event. Additionally, awardees are expected to disseminate results from their projects to relevant communities and public health decision makers, as appropriate.

CFAR Support: CFAR support (P30 AI027757) must be acknowledged in any publications and presentations derived from CFAR funding (see: <http://depts.washington.edu/cfar/discover-cfar/acknowledge-cfar>). Publications supported by this award must have PMCID numbers to comply with the NIH Public Access Policy.

Other Support: In the event that pending other support is funded which overlaps with or reduces your effort on this CFAR project, you must notify the Development core at cfardev@uw.edu. Your application aims and budget will be reviewed, and if you are unable to meet the specific aims of your CFAR proposal, the CFAR award will be revoked.