BACKGROUND
The Michigan Institute for Clinical & Health Research (MICHR) has partnered with Community-Based Organization Partners (CBOP) to establish a funding opportunity to address health issues in Flint. This award will fund community-engaged research partnerships and projects addressing community health priorities in the City of Flint. It is important to note the vitality of the partnership is as important as the quality of the research. We aim to enhance and build the capacity of community-academic teams to conduct research, utilizing principles of community-engaged research (e.g. shared power, mutual respect), community-based participatory research (e.g. equitable involvement in all phases) and multi-disciplinary approaches utilizing diverse forms of collaboration. Definitions for these terms are included in the RFP’s addendum.

Applicants should consider addressing one or more of the community-identified health need(s) listed below. The priorities are intentionally broad to allow teams to develop innovative ideas and research projects. Additional community priorities (not listed) may be addressed in proposals. Applicants may also focus on more than one priority.

1. Communications, information sharing, and transparency
2. Trust, mistrust and institutional relationships
3. Social-behavioral mental health interventions (i.e., anxiety, depression, substance abuse, paranoia, attention deficit hyperactivity disorder, etc.)
4. Special populations (especially youth and older adults)
5. Long-term health outcomes (i.e., substance use, maternal and child health, food insecurity, healthy lifestyles, healthcare access, etc.)
6. Capacity-building of faith and community-based systems for public health
7. Facilitating a community-wide research agenda

Goals: The goal is to strengthen the capacity of the Flint community to engage in, and benefit from the translational research enterprise.

Expected Outcomes: This funding opportunity works toward 1) supporting projects that will lead to an increased number of sustainable and equitable community-academic partnerships and 2) addressing community health priorities. For larger awards, measurements of your impact on health is also expected.

AWARD INFORMATION
Applications may request up to 1) $5,000 for partnership development activities (e.g. building relationships, exploring areas of shared interest) or 2) $10,000 for research projects.

The funding period for both types of applications is one year. Applications must be submitted to UMMS Competition Space by Friday, February 21, 2020 by 5:00 pm. Applicants will be notified of funding decisions in March.

CONTACTS AND RESOURCES
For questions about this funding opportunity, please contact Athena McKay. The MICHR Community Engagement Program provides no-cost consultation services to teams assessing partnership readiness, exploring community-engaged approaches, and developing grant applications.
Applicants interested in receiving specific guidance with their applications are encouraged to request a consultation.

**ELIGIBILITY**

Each application must have **at least two partners**: an academic partner who is affiliated with a college, school, or university and a community partner who is affiliated with a non-academic community organization or group (e.g. non-profit, a neighborhood coalition, etc.). Either partner can serve as the project lead. Applicants may propose a shared leadership model (co-leads).

~~ Academic partners do not need to be affiliated with the University of Michigan.~~

Community partners must be affiliated with organizations or groups located within the City of Flint. Community partners who do not have an organizational affiliation may serve as collaborators, consultants, mentors, advisors, and other roles in conducting the project.

Beyond members of the project team, partnerships should engage community residents and members of the public who have first-hand knowledge and experience that will be valuable to better understand the health issue or priority area.

**APPLICATION GUIDELINES**

Each application must include the following components:

1. **Face Page**: Include an abstract in the space provided and indicate the application type (partnership or project).

2. **Partnership / Project Plan**: A maximum **TWO-page**, single-spaced document (Arial 11, minimum of 0.5 inch margins) describing the partnership, or both the partnership and project concisely. Use the following overall format and note the suggested page limits.
   
   a. **Significance and Impact** (up to 0.5 page): Describe the specific priority area and health problem the partnership will address and its relevance to the communities involved. Describe how activities will lead to sustained research collaborations and projects.

   b. **Partners** (up to 0.5 page): Describe any previous experience partners have conducting community-engaged research, and expertise partners will bring to the project and/or partnership.

   c. **Approach** (up to 1 page): Describe the specific objectives of the project and/or partnership, and activities partners will conduct to meet the desired outcomes. Include details about the community-engaged research framework and/or approach partners will utilize along with a project timeline. Outline the community’s benefit from your project and/or partnership.

3. **References**: Not included in the page limit.

4. **Regulatory Approval**: For partnerships requesting funding to conduct a research project utilizing human subjects (and your application receives a fundable score), you will be required to provide additional human subjects documentation and Institutional Review Board approval, if applicable. Funds will not be released until approval has been secured.
5. **Budget and Justification:** All budget items must be listed and justified. The following items are not allowed on the budget: course buy-out more than 50% of the total proposed budget, equipment, computers, cost overruns, retroactive funding, grant preparation costs, travel unrelated to the conduct of research (e.g. conferences), renovations, or office supplies. This list may not be all inclusive, and applicants are encouraged to discuss allowable expenses with CE staff if there are questions.

6. **Letters of Support:** Academic Co-PI must obtain a letter of support from their department. Collaborators may document support for and commitment to the proposed project and/or partnership.

Items 2-6 must be combined into one PDF. Templates for the proposal’s face page, checklist, project plan, and budget are available at [MICHR](#).

**REVIEW PROCESS AND CRITERIA**

Applications will be reviewed by a committee of community and academic partners with extensive experience conducting community-engaged research. The following criteria will be used to evaluate applications:

- **Significance:** Does the project address a community-identified health need(s)? Is the project relevant and responsive to this need(s)?

- **Partnership:** Do the partners have complementary experience and expertise? Is there evidence on the equitable involvement of all partners?

- **Approach:** Will principles of community-engaged research be utilized? Are the proposed activities feasible within the allotted timeframe? Are the overall strategy and activities appropriate to accomplish the objectives? Outline the community’s benefit from your project and/or partnership.

- **Budget:** Is the budget realistic and appropriate considering the work proposed? Is the budget fairly distributed among partners?

- **Community Benefit:** Will the project/partnership provide direct benefits to the community involved?

- **Sustainability:** What is the likelihood the partnership will be sustained and the project will result in new grant applications or collaborative research efforts and relationships?

**AWARDEE RESPONSIBILITIES**

Each partnership funded to utilize a partnership tool at the beginning and end of the project to measure concepts such as trust and group dynamics (i.e., Schultz, et al, 2003). Additionally, larger projects ($10,000) will be asked to develop or use a community outcome measure. A consult with the MICHR evaluation specialist will be offered as part of the award.

Awardees will be **required** to attend an orientation meeting to discuss funding expectations, project plans, and support services available to partners and teams.

All funds must be spent by the end of the one-year funding period. Awardees are required to provide a six-month progress report and a final report upon the completion of the award period.
Addendum

Definitions included in the Background Section

Community-engaged research approaches are built on the premise that the health issues being studied are best understood by the community members living in the environments where the research is taking place, and that communities should be directly involved in the decisions that will affect their lives. This process requires power-sharing, equity, and flexibility in conducting research in a manner that fits the priorities, needs, and capacities of the communities involved.¹

Community is defined broadly as a group of people connected by similar characteristics, such as identities (e.g. social/economic backgrounds), geographic location (e.g. city of Flint), special interests (e.g. coalition to reduce childhood obesity), and/or situations that affect the well-being of that group.⁴

Community Based Participatory Research (CBPR) is defined as an orientation to research that emphasizes “equitable” participation of partners for “combining knowledge and action for social change to improve community health and eliminate health disparities”². CBPR involves authentic engagement of community members and stakeholders in all aspects of the research process, from problem definition through data collection, analysis, and dissemination and use of findings to affect program, practice, and policy changes³.

Multi-disciplinary approaches are one of many forms of collaboration and community engagement. Partnerships should include academic collaborators focused on different disciplines in translational science, and other stakeholders and communities such as patients, their caregivers and families, nonprofit organizations, governmental agencies, community-based clinicians, healthcare delivery systems, industry and others.

References


