

**U.S. Department of Health and Human Services
National Institutes of Health (NIH)
Office of the Director (OD)
Division of Program Coordination, Planning, and Strategic Initiatives (DPCPSI)**

**Council of Councils Meeting
March 2, 2020**

Informational Teleconference

I. CALL TO ORDER

James M. Anderson, M.D., Ph.D., Director, DPCPSI, welcomed participants to the conference call with members of the Council of Councils. The information call began at 4:30 p.m. EST on Monday, March 2, 2020. The call participants are identified below.

Following announcements from Robin Kawazoe, Deputy Director of DPCPSI and Acting Executive Secretary for the NIH Council of Councils, Dr. Anderson explained that the call was intended to notify the Council of a new congressionally-mandated program and provide the opportunity for discussion.

A. Attendance

1. Council Members

Council Members Present

Chair: James M. Anderson, M.D., Ph.D., Director, DPCPSI

Acting Executive Secretary: Robin I. Kawazoe, Deputy Director, DPCPSI

Maria Rosario G. Araneta, Ph.D., M.P.H., University of California, San Diego, La Jolla, CA

Jeffrey R. Botkin, M.D., M.P.H., The University of Utah, Salt Lake City, UT

Linda Chang, M.D., FAAN, FANA, University of Maryland School of Medicine,
Baltimore, MD

Graham A. Colditz, M.D., Dr.P.H., M.P.H., Washington University School of Medicine in St. Louis,
St. Louis, MO

Rick Horwitz, Ph.D., Allen Institute for Cell Science, Seattle, WA

Patricia D. Hurn, Ph.D., R.N., University of Michigan, Ann Arbor, MI

Kevin B. Johnson, M.D., M.S., Vanderbilt University Medical Center, Nashville, TN

R. Paul Johnson, M.D., Emory University School of Medicine, Atlanta, GA

Gary A. Koretzky, M.D., Ph.D., Weill Cornell Medical College, New York, NY

Richard D. Krugman, M.D., University of Colorado School of Medicine, Aurora, CO¹

Michael D. Lairmore, D.V.M., Ph.D., University of California, Davis, Davis, CA

Jian-Dong Li, M.D., Ph.D., Georgia State University, Atlanta, GA

Terry Magnuson, Ph.D., The University of North Carolina at Chapel Hill School of Medicine,
Chapel Hill, NC

Edith P. Mitchell, M.D., FACP, Thomas Jefferson University, Philadelphia, PA

Charles P. Mouton, M.D., M.S., The University of Texas Medical Branch at Galveston, Galveston, TX

Megan O'Boyle, Phelan-McDermid Syndrome Data Network, Arlington, VA

Susan Sanchez, Ph.D., The University of Georgia, Athens, GA

Jean E. Schaffer, M.D., Joslin Diabetes Center, Harvard Medical School, Boston, MA

Scout, Ph.D., National LGBT Cancer Network, Pawtucket, RI

¹ Appointment Pending.

Anna Maria Siega-Riz, Ph.D., M.S., University of Massachusetts Amherst, Amherst, MA
Russell N. Van Gelder, M.D., Ph.D., University of Washington, Seattle, WA

Council Members Absent

Maria L. Acebal, J.D., The Aspen Institute, Washington, DC
Kristin Ardlie, Ph.D., Broad Institute of MIT and Harvard, Cambridge, MA
Andrew P. Feinberg, M.D., M.P.H., Johns Hopkins University, Baltimore, MD
Paul J. Kenny, Ph.D., Icahn School of Medicine at Mount Sinai, New York, NY
Sachin Kheterpal, M.D., M.B.A., University of Michigan Medical School, Ann Arbor, MI
Rhonda Robinson-Beale, M.D., Blue Cross of Idaho, Meridian, ID

2. Presenters

William T. Riley, Ph.D., Director, Office of Behavioral and Social Sciences Research (OBSSR),
DPCPSI

3. NIH Staff and Guests

Dara R. Blachman-Demner, Ph.D., Health Scientist Administrator, OBSSR, DPCPSI

B. Announcements and Updates

Ms. Kawazoe reviewed the following:

- Council members are Special Government Employees during the days of Council meetings and are therefore subject to the rules of conduct governing federal employees.
- Each Council member submitted a financial disclosure form and a conflict-of-interest statement prior to the last meeting, in compliance with federal requirements for membership on advisory councils. The financial disclosures are used to assess real and perceived conflicts of interest, and Council members are recused during discussions of any items for which conflicts are identified.

II. FIREARM INJURY AND MORTALITY PREVENTION RESEARCH

William Riley, Ph.D., the director of OBSSR, presented a new congressionally-mandated program funded by the Fiscal Year 2020 Further Consolidated Appropriation Act (H.R. 1865) to conduct research on firearm injury and mortality prevention. Firearms account for three-quarters of homicide deaths, with significantly higher rates among black men ages 20 to 24 than white men of the same age, and the risk for injury and mortality in violent events increases when firearms are involved. Additionally, witnessing violent victimization and receiving nonfatal firearm injuries increase the risk of physical and mental or behavioral health conditions. For many years, the NIH has been committed to supporting scientific research to advance efforts to understand, prevent, and address the consequences of firearm violence; this program will expand those efforts by using a wide-ranging approach and open data to investigate the many potential causes of violent activities.

The first of the two mechanisms to be funded by this program is an R61 Clinical Trial Optional with up to \$400,000 in direct costs per year for a maximum of 2 years. Dr. Riley commented that this mechanism is similar to an R21 (but larger in size) and noted that although the program has funding only for FY 2020, projects can be funded in FY 2020 to cover multiple years. The other mechanism is a Notice of Scientific Interest for competitive revisions, a 1-year, competitive peer-reviewed supplement of up to \$200,000 in direct costs that would allow researchers to expand the scope of a current project to include firearms research. Dr. Riley listed potential topics for this program and emphasized that studies will approach this issue through the lens of public health, including health care and community settings, multilevel considerations (individual, peer, community,

structural), and victimization and perpetration risk. The studies will be inclusive of developmental stage, gender, disparity population, comorbid condition, and other special population.

Discussion Highlights

- When asked how to reconcile the requirement to remain ideologically neutral with the potential for data to address gun control issues, Dr. Riley explained that applications should remain consistent with the current Dickey Amendment regarding the prohibition of funding programs that advocate for gun control legislation. He emphasized that although the Dickey Amendment has many interpretations, NIH intends to focus this program on broad, structural issues, rather than on topics more likely to be interpreted as subject to the Dickey Amendment. Council members recommended including language in the Funding Opportunity Announcement (FOA) encouraging applicants to discuss the proposed study with their program officer to determine whether it will meet the conditions of the Dickey Amendment.
- Dr. Riley noted the intent to release the FOA within several days, emphasizing the rapid timeline of the project. The applicants will be provided adequate time to respond, but funds must be awarded by September 30, 2020, the end of the current fiscal year.
- Although the 2-year maximum for the R61 mechanism may be too short for some kinds of studies, Dr. Riley explained that significant forward-funding of longer awards would decrease the number of applications that could be funded.
- Dr. Riley explained that NIH anticipates funding more R61s than supplements, but the balance will depend on the priority scores and the potential impact of the applications.

III. CLOSING REMARKS AND ADJOURNMENT

Dr. Anderson thanked the Council members and speakers for their contributions and adjourned the call at 4:52 p.m. EST on March 2, 2020.

IV. CERTIFICATION

I hereby certify that, to the best of my knowledge, the foregoing summary is accurate and complete.

James M. Anderson, M.D., Ph.D.
Chair, NIH Council of Councils
Director, DPCPSI, OD, NIH

Date

Robin Kawazoe
Acting Executive Secretary, NIH Council of Councils
Deputy Director, DPCPSI, OD, NIH

March 5, 2020

Date