

NIH Tribal Health Research Office (THRO)

Division of Program Coordination, Planning, and Strategic Initiatives
Office of the Director

David R. Wilson, Ph.D., Director

NIH Tribal Advisory Committee Virtual Meeting December 2-3, 2020

NIH Tribal Advisory Committee Virtual Meeting

Improving how we operate:

- > Rules of order
- Point of contact
- > TAC leading the way

THRO and COVID-19:

- Rapid-Response NIH Consultation
- > THRO, CoVPN, OWS
- > NIH CEAL
- Communicating with Tribal Nations
- > Tribal participation in vaccine trials

NARCH:

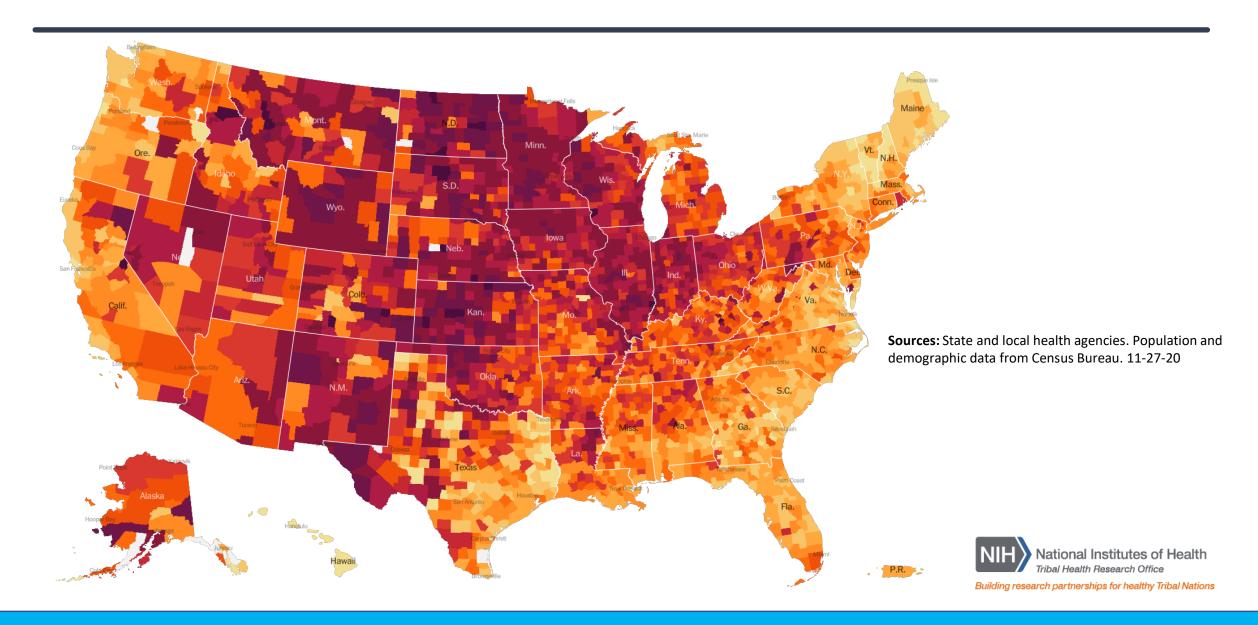
Collaborations with CSR

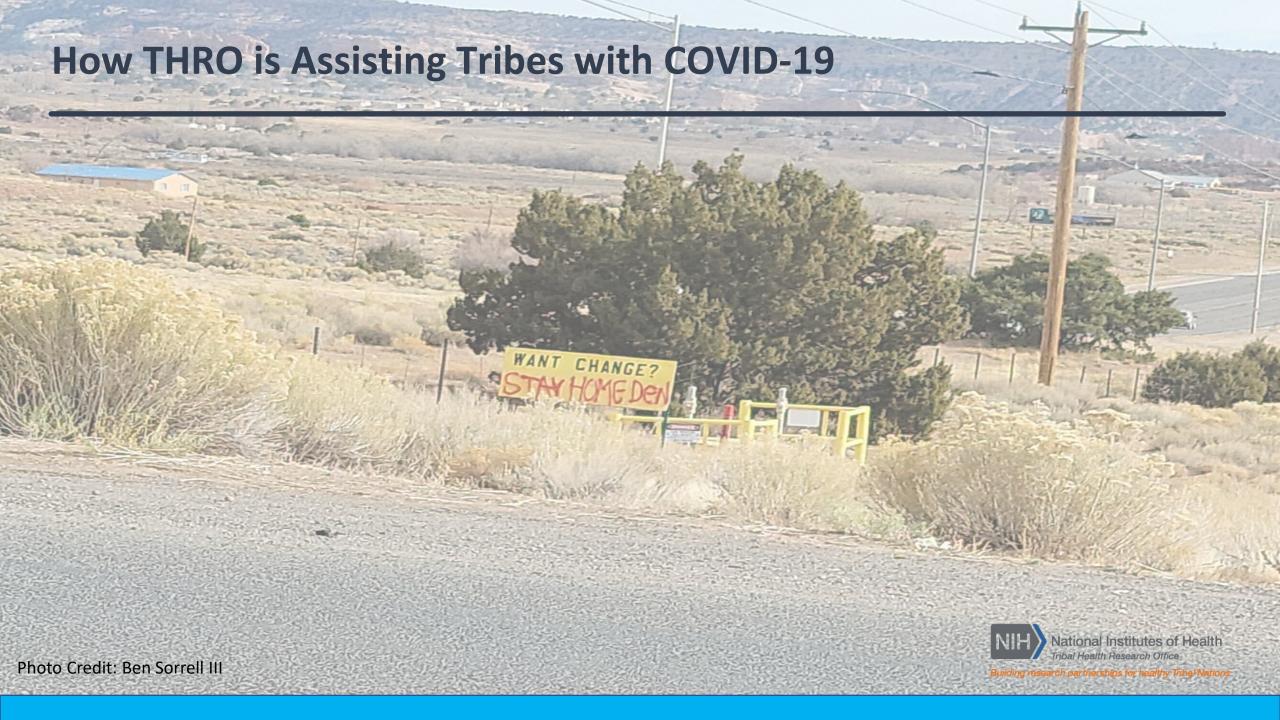
Strategic Plan Tracking System:

Portfolio analysis



Average Daily COVID-19 Cases Per 100,000 People in Past Week





NIH Tribal Consultation on COVID-19 Research



Outcomes

- Informed RADx-UP funding opportunities (8 applications with Tribal focus)
- Created awareness that Consultation should not be bypassed for speed

THRO Engagement During Vaccine Development

Operation Warp Speed (Interagency Partnership)

US Dept. of Health & Human Services, including:

- Centers for Disease Control and Prevention (CDC)
- Food and Drug Administration (FDA)
- National Institutes of Health (NIH)
- Biomedical Advanced Research and Development Authority (BARDA)

Other Federal Agencies:

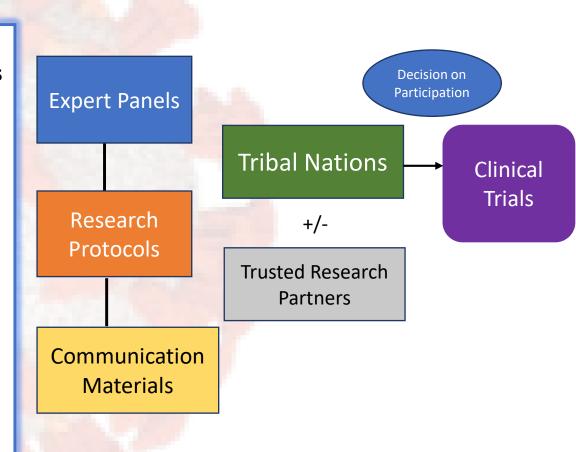
- Dept of Defense (DOD)
- •Dept of Agriculture (USDA)
- Dept of Energy (DOE)
- Dept of Veterans Affairs (VA)

Private firms

NIH COVID-19 Prevention Network (CoVPN) Supports Operation Warp Speed

Created by merging four existing NIAID-funded clinical trials networks:

- HIV Vaccine Trials Network (HVTN), Seattle, WA
- HIV Prevention Trials Network (HPTN), Durham, NC
- Infectious Diseases Clinical Research Consortium (IDCRC), Atlanta, GA
- •AIDS Clinical Trials Group, Los Angeles, CA





COVID-19 Vaccines in Late Phase Clinical Trials in the US

Developer	Platform	Planned Start	Eligibility	Number of Doses	Specimens Collected	Planned Follow-up
Moderna	mRNA	July	18+ years, healthy or medically stable, no prior COVID-19	2 doses, 28 days apart	Blood, nasal swab	2 years
Pfizer/ BioNTech	mRNA	August	18-85 years, healthy or medically stable, no prior COVID-19	2 doses, 21 days apart	Blood, nasal swab	2 years
Oxford/Astra- Zeneca	Adenovirus vector	August	18+ years, healthy or medically stable	2 doses, 28 days apart	Blood, nasal swab, saliva	2 years
Janssen	Adenovirus vector	September	Healthy 18-59 years first, then add in 60+ years, with and without comorbidities	1 or 2 doses, 8 weeks apart	Blood, nasal swab, saliva	1 year and 3 months
Novavax	Protein nanoparticle	October	18+ years, healthy or medically stable	2 doses, 21 days apart	Blood, nasal swab	2 years
Sanofi/GSK	Protein Subunit	December	18+ years	2 doses, 21 days apart	Blood, nasal swab	12 months



NIH COVID-19 Community Engagement Initiative: CEAL Program

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CEAL Tribal Nation Interest Group Strategy

Based on CEAL Team applications, there was a need to engage with American Indian communities. The following CEAL Tribal Nation Interest Group* strategy was developed in collaboration with THRO, NIH SMEs, and CEAL Teams that identified American Indians as a community of focus.

VISION

Collaborating with Tribal Nations by providing American Indian communities with information, tools, and resources to make informed decisions about research participation related to COVID-19 and beyond.

CONSIDERATIONS AND CHALLENGES

Each Tribal Nation has unique needs and challenges. As a result, there isn't a one-size-fits-all approach and ability to move forward and show progress will vary from CEAL Team to CEAL Team.

INTEREST GROUP COLLABORATORS

THRO, CEAL Program, NIH SMEs, CEAL Team POCs

*An Interest Group differs from a Work Group in that it does not include representation from all CEAL Teams.

Short-Term Goals

- Understand unique American
 Indian needs per CEAL Team
- Delineate what "success" means for each CEAL Team
- Connect CEAL Teams with additional and local entities that could help facilitate Tribal Engagement
- Assist with problem-solving
- Disseminate information and provide resources
- Create a re-occurring forum for CFAL Teams to collaborate

Long-Term Goals

- Identify potential longerstanding community partnerships within Tribal Nations
- Codify approaches the group will develop and continue to refine for future NIH use



Building research partnerships for healthy Tribal Nations

mRNA Based Vaccine Platform

Moderna/mRNA-1273 The COVE Study

mRNA platform

- · Translated in the cytosol to the coronavirus spike protein
- mRNA vaccines are not made with pathogen particles so are non-infectious
- mRNA is degraded after translation; it does not enter the nucleus or become integrated into the host genome
- · RNA vaccines are much quicker and simpler to make



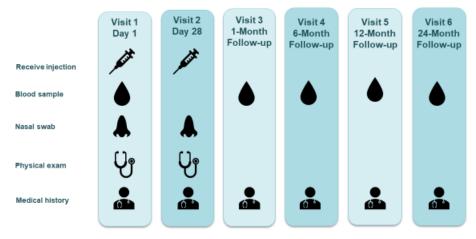
mRNA for spike protein of coronavirus

mRNA is injected into muscle The vaccine triggers production of the spike protein and antibodies specific to it





Study timeline: Moderna/mRNA-1273 The COVE Study





Adenovirus Based Vaccine Platform

Astra Zeneca / AZD1222

- ChAdOx1 platform (Adenovirus Vector) non replicating
- · Produces coronavirus spike protein
- Development of the vaccine was initiated by the University of Oxford in the United Kingdom

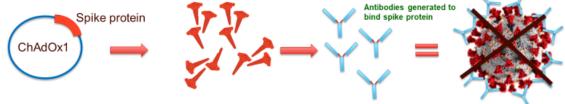
Phase 1/2 results:

Vaccine elicits antibody immune responses and cellular immunity

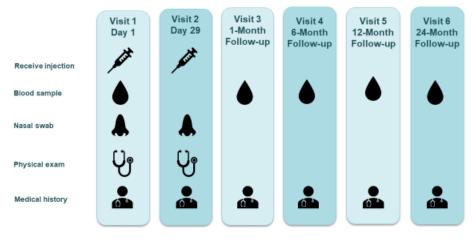
· Adverse reactions (fever, fatigue, and chills)

Phase 2/3 currently ongoing:

- The vaccine is now being tested by more than 75 clinical sites in the US.
- Approximately 30,000 participants from the United States will participate
- Participants will be randomized in a 2:1 ratio to receive either a dose of AZD1222 vaccine or placebo.



Study timeline: Astra Zeneca





Protein Based Vaccine Platform

Novavax 2019nCoV-301

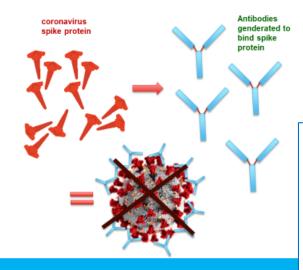
Protein platform: use part of coronavirus protein with Matrix-M1 to provoke an immune response

Phase 1/2 results: (tested on 131 people aged 18-59)

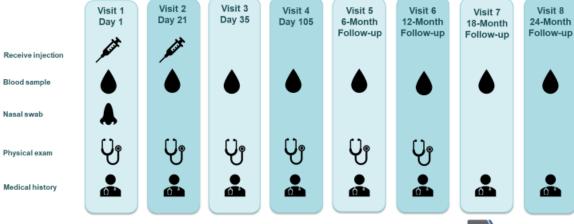
- Vaccine elicits antibody immune responses and cellular immunity
- · Some adverse reactions (fever, fatigue, and chills)
- · Phase 2 ongoing

Phase 3: will enroll ~30,000 people aged ≥18 years from sites globally; enrollment slated to begin in October

Vaccine uses antigen derived from the **coronavirus spike protein** to stimulate neutralizing **antibodies**

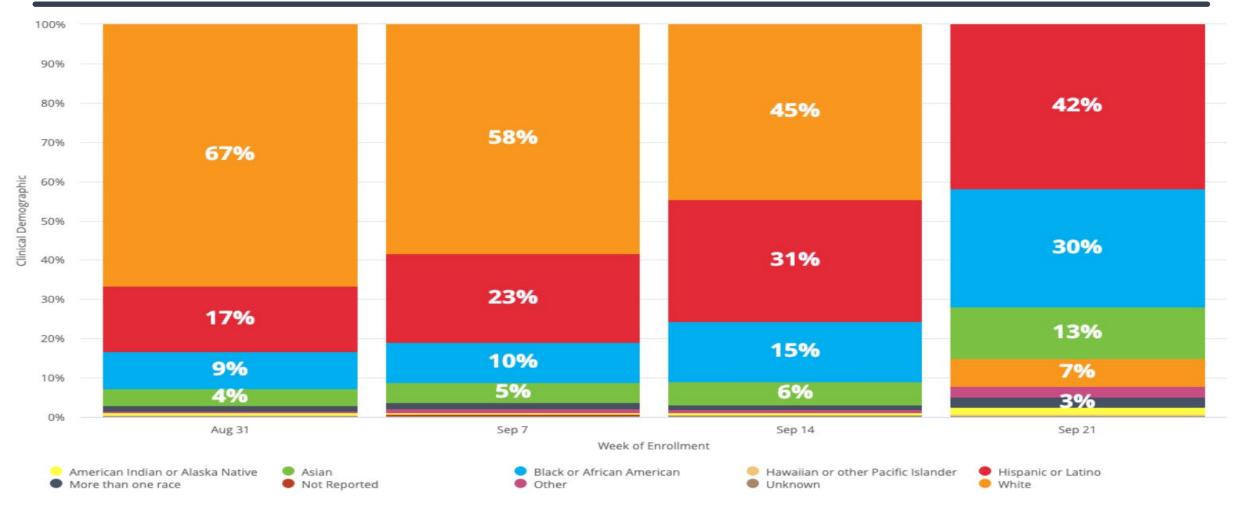


Study timeline: 2019nCoV-301





Minority Enrollment in Vaccine Trials Increases Substantially with Appropriately Targeted Engagement and Outreach



As of Friday, September 25, 2020, nearly 31% of participants enrolled cumulatively are from diverse communities. https://www.modernatx.com/cove-study



Pfizer Study

Trial Progress



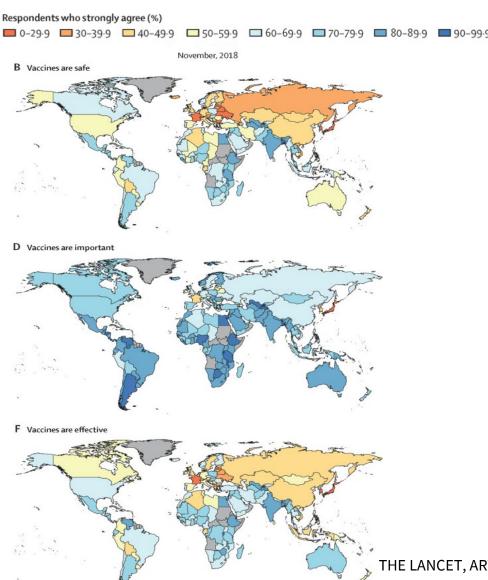
The Phase 2/3 clinical trial has enrolled 43,661 participants and 41,135 participants have received their second vaccination

Participant Diversity

Approximately 42% of overall and 30% of U.S. participants have diverse backgrounds

Participants	Overall Study	U.S. Only	
Asian	4.5%	5.5%	
Black	10.0%	10.1%	
Hispanic/Latinx	26.1%	13.1%	
Native American	0.8%	1.0%	
Ages 56 to 85	40.9%	45.4%	

Vaccine Uptake



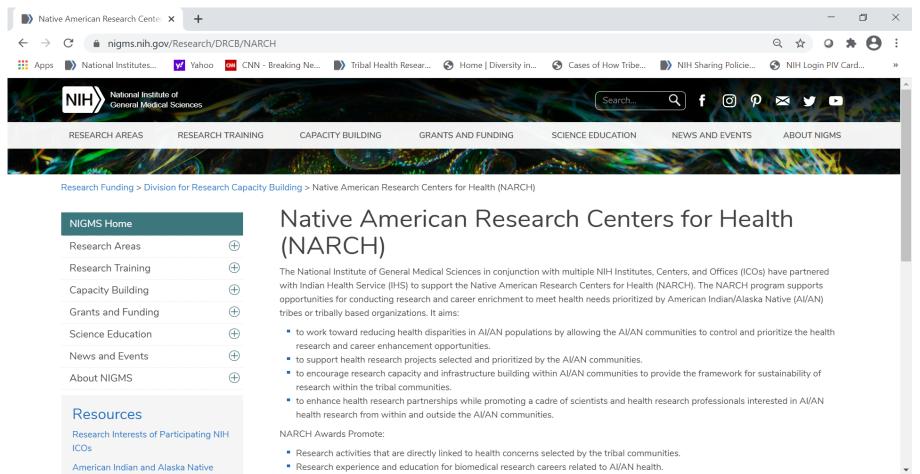
- ➤ Japan ranks among the countries with the lowest vaccine confidence in the world.
- ➤ Linked to HPV vaccine safety scares in 2013.

What should NIH do to increase vaccine uptake in Tribal communities?



Strategic Goal #2 and #4

Community Engagement and Collaboration to Expand Research





Funding Opportunity Title

Native American Research Centers for Health (NARCH) (S06 Clinical Trials Optional) PAR-16-297

Research Objectives

Due to the complexity of factors contributing to the health and disease of Al/ANs, and to their health disparities compared with other Americans, the collaborative efforts of the agencies of the Department of Health and Human Services (HHS) and the collaboration of researchers and Al/AN communities are needed to achieve significant improvements in the health status and promote wellness of Al/AN people. To accomplish this goal, the NARCH initiative will pursue the following program objectives:

- To gain a better understanding of strengths and resiliency factors: An understanding of how to enhance the strengths and resilience factors within the Al/AN communities and individuals may help reduce health disparities. While Al/AN communities have relied on health research and medical science to promote overall healthful behaviors, they have also relied on their own psychological, organizational, and cultural assets and strengths to survive major harms and disruptions over the centuries, and to rebound from insults to health.
- Strengthen partnerships and Al/AN community engagement in health research: Fully utilizing all cultural and scientific knowledge, strengths, and competencies, such partnerships can lead to better understanding of the biological, genetic, behavioral, psychological, cultural, social, and economic factors either promoting or hindering improved health status of Al/ANs, and generate the development and evaluation of interventions to improve their health status. By ensuring that the Tribe has greater control over the research process, the Al/AN communities can dictate the scientific agenda and research priorities. Published work on community-based participatory research suggests that Al/AN communities should work collaboratively in partnership with health researchers to further the research needs of Al/AN. Helpful guidelines for community leaders and health researchers conducting research within the Al/AN communities can be found at https://dpcpsi.nih.gov/sites/default/files/Critical Considerations for Reviewing AlAN Research 508.pdf and https://www.ncai.org/policy-research-center/initiatives/research-regulation.
- Promote the enhancement of student and/or faculty research scientists interested in addressing the health issues within the Al/AN communities: Opportunities are needed to enhance the cadre of scientists and health professionals engaged in health research focused on Al/AN health needs, and to conduct biomedical, clinical and behavioral research that is responsive to the needs of Al/AN communities and the goals of this initiative. Faculty/researchers and students at each proposed NARCH can develop investigator-initiated, scientifically meritorious research projects, including pilot research projects. Career enhancement projects may also be proposed to improve the research skills of investigators involved with Al/AN communities.
- Encourage research infrastructure and capacity building within AI/AN communities, ensuring sustainability of research within AI/AN communities: Supporting the research infrastructure development and capacity building within the AI/AN communities provides tools to support research from within the communities, as well as the long-term maintenance and evolution of their research agenda.

By involving the community in health research and integrating the training of researchers the pool of investigators and the scientific knowledge of the communities can be increased. This approach benefits the communities in terms of research design and sustainability. By involving the Al/AN communities in the research agenda for the proposed NARCH application, NIH is not limiting proposed projects to only Community Based Participatory Research (CBPR) projects. Research projects ranging from basic science to clinical investigation are welcome and encouraged. Projects that do not focus on health disparities can be chosen as priorities for the proposed Al/AN populations.

National Institutes of Health

NIH Strategic Goals for Tribal Health Research

The **Strategic Plan** established a roadmap for the agency to address the health research needs of American Indian and Alaska Native communities by:

- 1. Enhancing communication and collaboration
- 2. Building research capacity
- 3. Expanding research
- 4. Enhancing cultural competency and community engagement





THRO Collaboration with Office of Evaluation, Performance, and Reporting (OEPR): The Strategic Plan Module

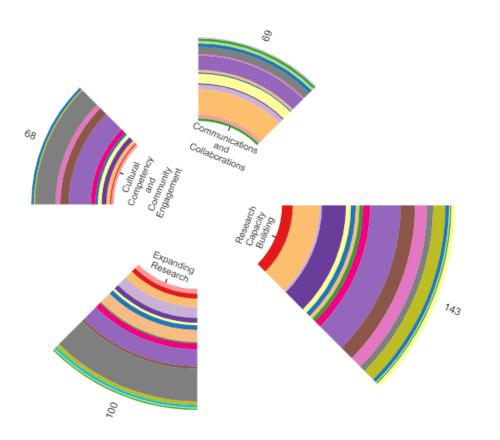
Tool: Internal tracking system (NIH Only)

Data:

- ICO information collected by THRO and provided by THRCC members
- RePORTER Data (publicly available)
- Collaboration



Activities Count Chart





CSR

NCATS

NCCIH

OD/OBSSR OD/ORWH

OEDI

- 1. Enhancing Communication and Collaboration
- 2. Building Research Capacity for American Indian and Alaska Native Communities
- 3. Expanding Research
- 4. Enhancing Cultural Competency and Community Engagement

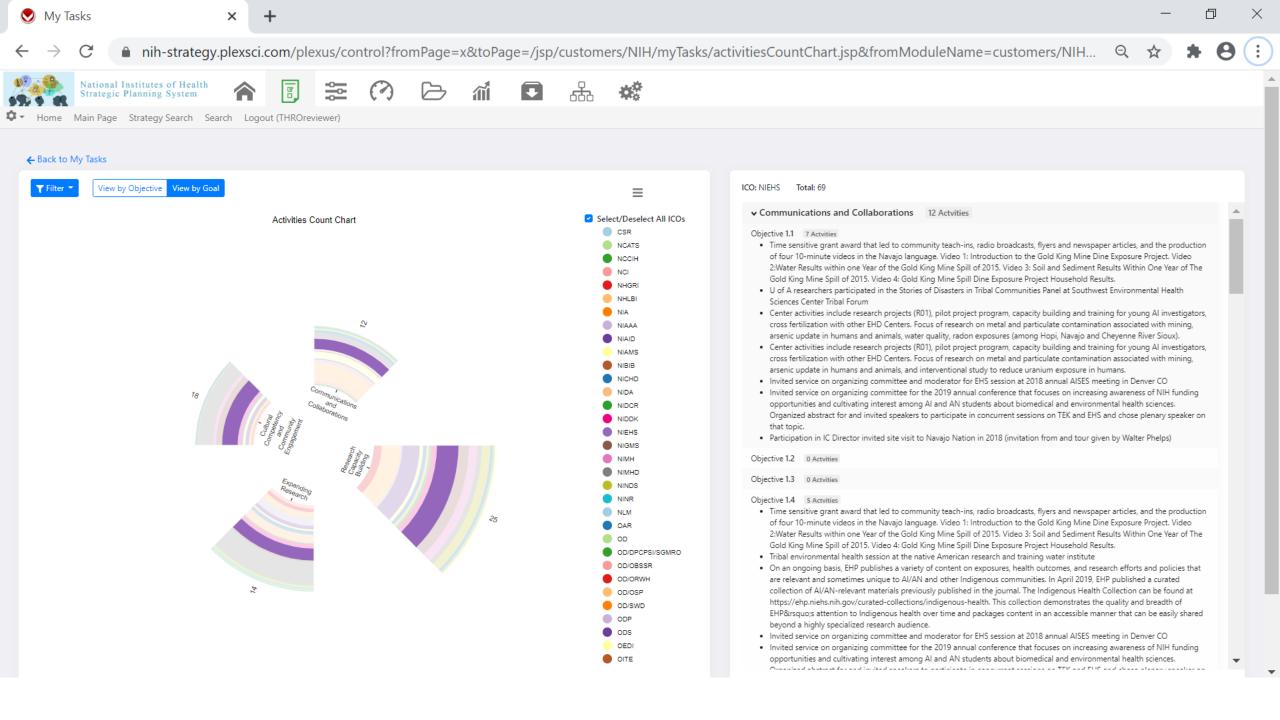


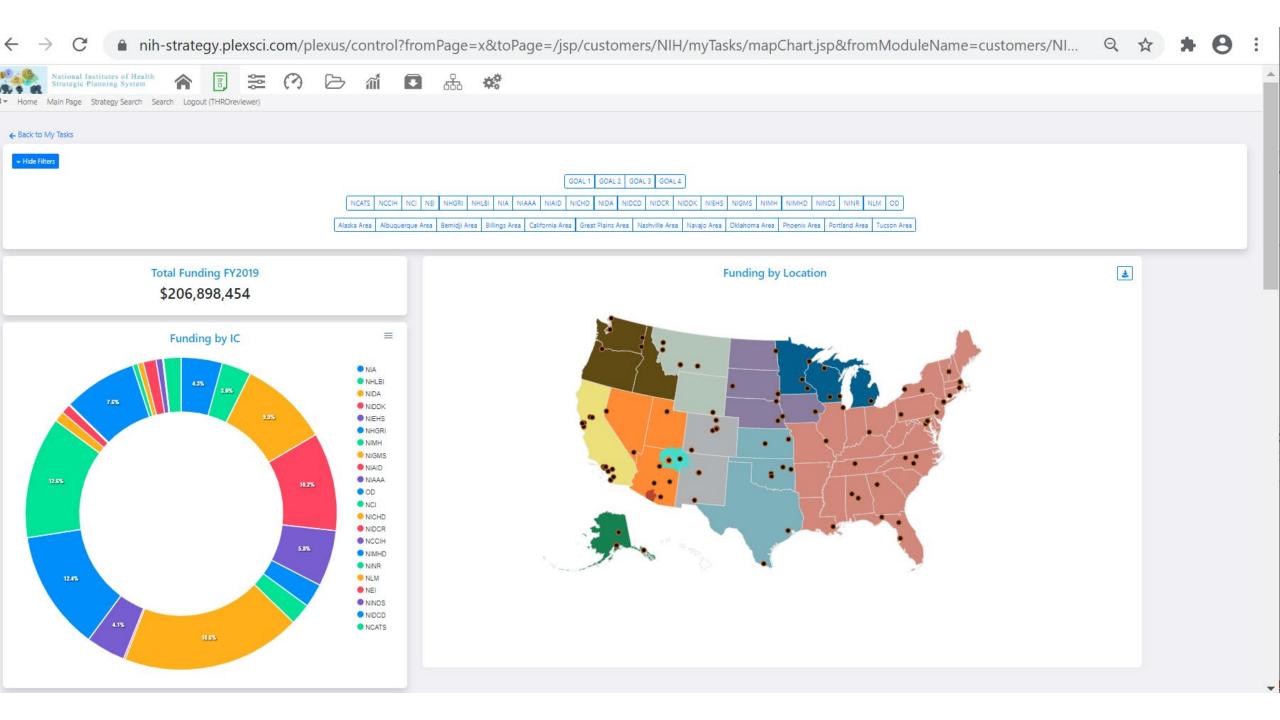
CSR Activities Count Chart NCATS NIAAA NIAMS NIBIB NICHD NIDA NIDCR NIDDK NIEHS NIGMS NIMH NIMHD NINDS NLM OAR OD OD/DPCPSI/SGMRO OD/OBSSR OD/ORWH OD/OSP OD/SWD ODP ODS OEDI

Strategic Objectives

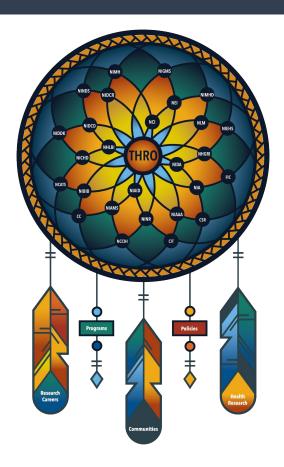
- 1.1 Increase bidirectional communication and coordination among the NIH, Tribal nations, American Indian and Alaska Native researchers, American Indian and Alaska Native-serving organizations, and agency partners.
- 1.2 Enhance NIH Tribal Advisory Committee (TAC) input to NIH policies and activities related to American Indian and Alaska Native health.
- 1.3 Enhance internal trans-NIH communication to consolidate and coordinate information about American Indian and Alaska Native health needs and ICOs' research, interests, and activities.
- 1.4 Improve trans-NIH communication with the scientific community about American Indian and Alaska Native health research, health disparities, and related ICOs' research and activities.















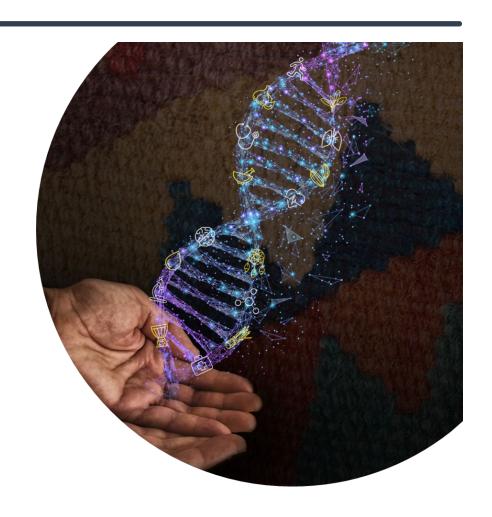
2020 NIH Rural Health Seminar

"During this challenging time, THRO is more dedicated than ever to building research partnerships for healthy Tribal Nations. In our work, we acknowledge the enduring hope, resiliency, and wisdom of American Indian and Alaska Native communities across the country, understanding these strengths are the drivers on the road to continued healing and recovery."

- David R. Wilson, Ph.D., (Diné) Director, THRO

Other Highlighted Activities

- World AIDS Day
- > Tribal Epidemiology Centers (TECs)
- > Efforts Around HIV/AIDS, COVID-19, Maternal Health, Opioid Use
- > Native American Heritage Month
- > Alaska Native Tribal Health Consortium
- > FY 2018 AI/AN Portfolio Analysis Update



Connect With Us and Learn More



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