

## Notice of Special Interest (NOSI) regarding the Availability of Administrative Supplements and Urgent Competitive Revisions for Mental Health Research on the 2019 Novel Coronavirus

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Notice Number: NOT-MH-20-047

### Key Dates

**Release Date:** April 9, 2020

**First Available Due Date:** March 27, 2020

**Expiration Date:** April 16, 2021

### Related Announcements

[PA-18-591](#) Administrative Supplements to Existing NIH Grants and Cooperative Agreements (Parent Admin Supp Clinical Trial Optional)

[PA-18-935](#) Urgent Competitive Revision to Existing NIH Grants and Cooperative Agreements (Urgent Supplement -Clinical Trial Optional)

### Issued by

National Institute of Mental Health ([NIMH](#))

National Institute on Aging ([NIA](#))

National Institute on Alcohol Abuse and Alcoholism ([NIAAA](#))

National Institute on Minority Health and Health Disparities ([NIMHD](#))

All applications to this funding opportunity announcement should fall within the mission of the Institutes/Centers. The following NIH Offices may co-fund applications assigned to those Institutes/Centers.

Division of Program Coordination, Planning and Strategic Initiatives, Office of Disease Prevention ([ODP](#))

### Purpose

NIMH is issuing this Notice of Special Interest (NOSI) to highlight interest in research to strengthen the mental health response to Coronavirus Disease 2019 (COVID-19) caused by the Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2) and to future public health emergencies, including pandemics. NIMH is especially interested in research to provide an evidence base for how a disrupted workforce may adequately respond/adapt to and maintain services or provide additional care for new or increasing mental health needs, as well as to learn about the effects of the virus and public health measures to prevent spread of COVID-19 that may have an impact on mental health. Research addressing the intersection of COVID-19, mental health, and HIV treatment and prevention are also of interest to NIMH.

### Background

As people across the U.S. and the rest of the world respond to the COVID-19 pandemic, the body of research from prior disasters as well as other stressful and traumatic events indicates this experience will likely have a negative impact on people with existing mental health conditions and will produce wide-spread distress among other members of the population and possible suicide risk. Researchers with ongoing studies will need to consider this global event and contextualize the information they gather from participants, particularly to interpret longitudinal data, but that is outside the intent of this NOSI. That will provide a rich opportunity to better understand how this event impacts virtually every area of mental health. Considering those who have a history of mental illness, as well as those experiencing symptoms for the first time, we can anticipate challenges with receipt of mental health services as the healthcare system is itself challenged, pulled to other healthcare tasks, or shifted to telehealth delivery to protect the health of providers and patients. Public health approaches

through ongoing risk communication and actions to prevent the spread of disease, such as social distancing, shelter-in-place orders, quarantine, etc., may further impact individual and community level functioning. Given what is known about the adverse consequences of stress on health including mental health, the research community can help those suffering today and future people exposed to trauma and stressful situations by examining how what is known about promoting adjustment and recovery from a mental health perspective can be implemented into practice and by improving our understanding and treatment of those who suffer from mental illness.

## Research Objectives

In order to significantly improve our understanding of the risks, mechanisms, and treatment in response to COVID-19 among individuals at risk for, or experiencing mental disorders across the full lifespan, NIMH is encouraging the submission of applications to address the following areas of scientific interest:

- Research on alternatives to traditional services that rely on an available workforce to meet emergent psychiatric needs.
- Projects to develop and test tools that would enable health and social service workers to have real-time access to resources for case management and referral to medical/psychiatric treatment, as well as social support services, to meet the complex needs of persons with mental illness - who are in communities with cases, or have contracted SARS-CoV-2 themselves (needing e.g., in-patient beds, behavioral health crisis services, open brick and mortar and online pharmacies, the range of medication management and prescription access (e.g., out-patient opioid replacement therapy and antipsychotic medications, primary care medication access and management, shelter resources, food assistance).
- Research to determine the feasibility and utility of technology enabled screening to identify/triage those in immediate need of in-patient behavioral health, medications, and opioid replacement therapy. Higher priority research would include evaluation of participant follow through and outcomes related to pointofcare triage and referral to services (e.g., web-based or other self-care, and/or telephone counseling that supports individual brief CBT for distress, online group interventions, etc.).
- Development and testing of technology to leverage/build on the available response workforce to enable practical, scalable, and sustainable mental health screening, triage, and prevention/treatment interventions along a continuum of intensity for mental disorders across the lifespan, particularly for high risk populations. Interventions appropriate for mass trauma response are of interest (e.g., Psychological First Aid [PFA]; enhanced PFA; self-guided and professionally assisted skillsbased interventions, internetbased interventions for managing common posttraumatic symptoms and stressrelated symptoms and conditions; brief CBT-based approaches for distress, and Collaborative Care programs).
- Develop and test decision aides and evaluate utility for improving service access/engagement/outcomes.
- Research accessing and leveraging public and/or commercial mental health claims data and/or private EHR data to identify populations at high risk for functional impairment and health service interruption, and/or to target vulnerable populations for outreach and interventions.
- Research to understand and improve engagement and continuity of care including approaches to facilitate (re)connection to care for persons with serious mental disorders who experience disruption in services.
- Research focused on persons with pre-existing serious mental illness and their ability to maintain functioning, symptom stability, and implement their region's recommended or mandated safety measures to prevent transmission of SARS-CoV-2, e.g., staying at home except for essential business.
- Research on interventions to prevent suicide, especially among populations that may have less familiarity with or access to technologically-mediated means of social connection (e.g., older adults, individuals in rural communities).
- Research to identify potential intervention targets for modifying social connectedness, isolation, and/or loneliness via social media and/or electronic communication to prevent the development of clinically significant mental health symptoms.
- Studies on the impact (e.g., access, quality, and clinical outcomes) of state, local, federal, and guild-specific guidelines and policies around telehealth services, and of changes in those policies, with specific attention on the risks and benefits of relaxing those guidelines or policies.

- Research to test the feasibility and impact of programs that integrate testing for SARS-CoV-2 with HIV testing or other screenings, or which leverage existing HIV testing programs, strategies, and initiatives to expand access to SARS-CoV-2 testing among marginalized communities.
- Research on interventions such as those conducted through telemedicine that strengthen mental health and HIV prevention and care needs to advance COVID-19 prevention and mitigation efforts. This may include interventions that promote continuity of HIV prevention services, including mental health services, during the COVID-19 pandemic. Also, research to understand the impact of disrupted HIV care systems and/or social distancing on mental health, HIV care engagement, medication adherence, and viral suppression among people living with HIV in a manner that would directly inform future support interventions.
- Research that leverages existing cohorts to examine CNS complications including mental illness risk, onset, course as well as behavioral consequences due to SARS-CoV-2 immune responses and impact of SARS-CoV-2 co-infection with HIV on the CNS.

The National Institute on Aging (NIA) will accept applications for supplements and revisions to NIA-supported projects that fall within the scope of this announcement and are relevant to the mission and strategic priorities of the NIA. Applications are encouraged that address the specific needs and circumstances of midlife and older adults, including, but not limited to, individuals with Mild Cognitive Impairment (MCI), Alzheimer's disease and Alzheimer's disease related dementias (AD/ADRD) and their healthcare providers and caregivers.

The National Institute on Minority Health and Health Disparities (NIMHD) will accept and consider support for applications for supplements and revisions to NIMHD projects that fall within the scope of this announcement and are relevant to the mission and strategic priorities of NIMHD. Areas of special interest are:

- Examination of the onset and the course of anxiety and depression due to SDOH challenges (e.g., financial strain, housing insecurity, food insecurity, potential occupation-based exposure, etc.) exacerbated by COVID-19.
- Studies focused on point-of-care screening for COVID-19, brief mental health assessment, and referral for populations who are less likely to engage in mental health services.

The National Institute on Alcohol Abuse and Alcoholism (NIAAA) will accept applications for supplements and revisions to NIAAA-supported projects that fall within the scope of this announcement and are relevant to the mission and strategic priorities of the NIAAA. Specifically, NIAAA encourages applications studying individuals with alcohol use disorder with and without comorbid psychiatric disorders, e.g., posttraumatic stress disorder, anxiety disorder, major depressive disorder, etc. Specific areas of interest include but are not limited to service delivery, telehealth, interactions between stress and social isolation on symptomatology, and increased risk for suicide as related to alcohol use in the general population and in under resourced communities, such as racial, ethnic and gender minorities; low socioeconomic, incarcerated, and homeless populations, etc.

## **Application and Submission Information**

Applications in response to this NOSI must be submitted using the following targeted funding opportunities or their subsequent reissued equivalents:

- PA-18-935 Urgent Competitive Revision to Existing NIH Grants and Cooperative Agreements (Urgent Supplement - Clinical Trial Optional) is intended to provide funds for NIH grantees applying to expand the scope of their active grant.
- PA-18-591 Administrative Supplements to Existing NIH Grants and Cooperative Agreements (Parent Admin Supp Clinical Trial Optional) is intended to provide funds for NIH grantees where the work proposed in the supplement is fully within the scope of the ongoing grant.
- The funding instrument, or activity code, will be the same as the parent award.

**When developing applications in response to this NOSI, all instructions in the [SF424 \(R&R\) Application Guide](#) must be followed, with the following additions:**

- The Research Strategy section of the application is limited to 6 pages.

- Potential applicants are strongly encouraged to contact their Program Official before submitting an application to determine whether or not the proposed work meets the priorities of this program, whether requested funding is likely to be available, and whether the idea should be considered for initial submission as a fully developed, non-expedited application.
- Applications will be accepted on a rolling basis **through April 15, 2021 by 5:00 PM local time** of the applicant organization. This NOSI expires on April, 16, 2021.
- **IMPORTANT:** For funding consideration, all applicants must designate “**NOT-MH-20-047**” (without quotation marks) in the Agency Routing Identifier field (Box 4b) of the SF424 (R&R) Form. **Applications without this information in Box 4b will not be considered for this initiative.**
- All applications (including those for multi-project activity codes) must be submitted electronically using a single-project application form package:
  - Administrative supplement applications to [PA-18-591](#) must use the application form package with the Competition ID that contains “FORMS-E-ADMINSUPP”. This FOA will be reissued with application form packages containing “FORMS-F-ADMINSUPP” on May 25, 2020. Submissions to [PA-18-591](#) must be completed by June 25, 2020 (see [NOT-OD-20-026](#) for details.) Submissions to the reissued FOA will be accepted on or after May 25, 2020 through the expiration date of this Notice. In addition, the process for Streamlined Submissions using the eRA Commons cannot be used for this initiative.
  - Competitive revision applications to [PA-18-935](#) must use the application form package with the Competition ID of “NOT-MH-20-047-FORMS-E.” This FOA will be reissued with a “NOT-MH-20-047-FORMS-F” package on May 25, 2020. Submissions to [PA-18-935](#) must be completed by June 25, 2020. Submissions to the reissued FOA will be accepted on or after May 25, 2020 through the expiration date of this Notice.
- Review criteria for competitive revision applications, in addition to those described in [PA-18-935](#): As applicable for the project proposed, reviewers will evaluate the following additional items and their responsiveness to the immediate need to help address a specific, public health crisis in a timely manner in accordance with the associated Urgent Guide Notice, but will not give separate scores for these items.
  - Do the investigators have the expertise required to implement and immediate access to the resources (e.g. patient samples, isolates, etc.) at sufficient quantities to achieve the aims of the proposed research?
  - If the proposed research will generate unique resources or data that may impact the public health response or medical countermeasure development, is the resource sharing plan adequate?

Applications nonresponsive to terms of this NOSI will be not be considered for the NOSI initiative.

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## Inquiries

Please direct all inquiries to the contacts in Section VII of the listed funding opportunity announcements with the following additions/substitutions:

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