

Notice of Special Interest (NOSI): Dissemination and Implementation Research to Advance Mental, Emotional, and Behavioral Health Preventive Interventions in School Settings

Notice Number:
NOT-AT-22-004

Key Dates

Release Date:

March 29, 2022

First Available Due Date:

June 05, 2022

Expiration Date:

June 05, 2024

Related Announcements

[PAR-22-105](#) - Dissemination and Implementation Research in Health (R01 Clinical Trial Optional)

[PAR-22-109](#) - Dissemination and Implementation Research in Health (R21 Clinical Trial Optional)

[PAR-22-106](#) - Dissemination and Implementation Research in Health (R03 Clinical Trial Not Allowed)

[PAR-20-150](#) - NIMHD Exploratory/Developmental Research Grant Program (R21 Clinical Trial Optional)

[PA-20-172](#) - Long-Term Effects of Disasters on Health Care Systems Serving Health Disparity Populations (R01 Clinical Trial Optional)

[PA-20-185](#) - NIH Research Project Grant (Parent R01 Clinical Trial Not allowed)

[PAR-20-310](#) - Health Services Research on Minority Health and Health Disparities (R01 Clinical Trial Optional)

[PAR-21-129](#) - Clinical Trials to Test the Effectiveness of Treatment, Preventive, and Services Interventions (Collaborative R01 Clinical Trial Required)

[PAR-21-130](#) - Clinical Trials to Test the Effectiveness of Treatment, Preventive, and Services Interventions (R01 Clinical Trial Required)

[PAR-21-131](#) - Pilot Effectiveness Trials for Treatment, Preventive and Services

[PAR-21-287](#) - Effectiveness of School-Based Health Centers to Advance Health Equity (R01 Clinical Trial Optional)

[PAR-21-316](#) - Innovative Mental Health Services Research Not Involving Clinical Trials (R01 Clinical Trials Not Allowed)

[PAR-22-082](#) - Pilot Services Research Grants Not Involving Clinical Trials (R34 Clinical Trial Not Allowed)

Issued by

National Center for Complementary and Integrative Health ([NCCIH](#))

Eunice Kennedy Shriver National Institute of Child Health and Human Development ([NICHD](#))

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

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](#))

Office of Behavioral and Social Sciences Research ([OBSSR](#))

Office of Research on Women's Health ([ORWH](#))

Purpose

The purpose of this Notice of Special Interest (NOSI) is to stimulate dissemination and implementation research to support innovative approaches to identifying, understanding, and developing strategies for overcoming barriers to the adoption, adaptation, integration, scale-up and sustainability of evidence-based preventive interventions to support children's mental, emotional, and behavioral (MEB) health in school settings. This NOSI encourages applications which focus on dissemination and implementation research to deliver interventions in the school setting that will promote healthy MEB development and/or prevent MEB disorders. Applications should include a focus on one of the following: (1) primary/universal prevention MEB programs designed to promote healthy MEB development by decreasing risk factors and increasing protective factors to prevent onset of an MEB disorder; or (2) secondary/selective prevention programs designed to support screening and early identification of MEB disorders to slow progression with early intervention. Applications focused on tertiary/indicated treatment of MEB disorders will be considered non-responsive to this Notice.

Background:

In 2019, the National Academies of Sciences, Engineering, and Medicine published a report, *Fostering Healthy Mental, Emotional and Behavioral Development in Children and Youth*. The report revealed that MEB disorders (e.g., anxiety disorders, depression, substance use disorders, and/or behavior disorders) are common, emerge during childhood or adolescence, and are linked to disability, school dropout, incarceration, and homelessness, posing a major threat to healthy development. Importantly, poor MEB health negatively impacts academic performance, and this carries over into postsecondary education. Children have limited access to services for promoting MEB health and preventing MEB disorders. This is particularly true for children from NIH-designated health disparity populations (i.e., Blacks/African Americans, Hispanics/Latinos, American Indians/Alaska Natives, Asian Americans, Native Hawaiians and other Pacific Islanders, socioeconomically disadvantaged populations, underserved rural populations, and sexual and gender minorities) and other vulnerable populations (e.g., children with disabilities, homeless youth). Public schools have increasingly become key access points of MEB health programs, services, and referrals for children. Although efficacious evidence-based interventions aimed at preventing MEB disorders exist, challenges and barriers need to be addressed to improve their adoption, integration, scale-up and sustainability. To advance health equity in MEB health outcomes, local adaptations to existing interventions may be needed to promote scale-up and sustainability of interventions in ways that better meet the needs of children from health disparity and vulnerable populations.

Research Objectives:

The objectives of this NOSI are to advance implementation and dissemination research of evidence-based MEB programs aimed at promoting children's mental, emotional, and behavioral health or preventing MEB disorders in school settings, with a particular focus on schools that serve NIH designated health disparity populations and other vulnerable populations likely to be under-resourced.

Topics of interest include, but are not limited to:

- Studies of strategies to implement MEB health promotion and prevention interventions (i.e., primary/universal; secondary/selective) into school settings
- Studies that identify the core components of preventive MEB interventions or policy that make it effective, as well as the optimal ways to improve the fidelity of implementation and/or adapt those components for diverse settings when necessary
- Studies to inform how multi-level (e.g., student, teacher, school, family, community) MEB interventions and/or interventions targeting multiple MEB outcomes can be optimally delivered in K-12 school settings
- Strategies that leverage multi-level, cross-sector partnerships among schools, businesses, health care systems, community-based organizations, and other community resources to advance the scale-up of effective MEB health programs, policies, and practices
- Studies testing the effectiveness of dissemination or implementation strategies to reduce health disparities in MEB health and improve quality of care among rural, minority, low literacy and numeracy, and other underserved children and adolescents
- Studies conducting comparative economic evaluation of implementation strategies to foster MEB health in school settings and/or across phases of implementation
- Longitudinal follow-up studies on implementation strategies, adaptations, and/or other potential factors that may contribute to the long-term sustainability of evidence-based MEB prevention programs, practices, or policies in school-settings
- Research that includes multi-jurisdictional data or multiple school districts is encouraged, in particular to consider how features of the broader community and resources impact the effectiveness, adoption, scale-up, and sustainability of MEB health programming.

IC Specific Application and Submission Information:

Applicants must select the IC and associated FOA to use for submission of an application in response to the NOSI. The selection must align with the IC requirements listed in order to be considered responsive to that FOA. Non-responsive applications will be withdrawn from consideration for this initiative.

National Center for Complementary and Integrative Health (NCCIH)

NCCIH supports research on the use of complementary and integrative health approaches to promote healthy MEB development and prevent MEB disorders. For this NOSI, NCCIH has interests in supporting Hybrid Type 2 and Hybrid Type 3 effectiveness-implementation studies to improve the adoption, scale-up, and sustainability of interventions that incorporate the use of complementary and integrative health approaches to promote MEB health and/or prevent MEB disorders among children and adolescents in school settings. The complementary interventions proposed should have strong evidence of efficacy for MEB health to warrant their inclusion inschool-based settings. Complementary approaches of interests include those with physical and/or psychological therapeutic inputs, often called mind and body approaches (e.g., acupuncture, yoga, tai chi, qi gong, meditation, mindfulness approaches, hypnosis, music therapy, art therapy, spinal or chiropractic manipulation, and massage) as well as approaches with dietary or nutritional therapeutic inputs (e.g., special diets). Integrative approaches include therapies that combine complementary approaches with conventional MEB interventions such as psychological interventions, exercise, or social-emotional learning programs. A priority area for NCCIH is studies to improve uptake and sustainability of MEB interventions to reduce health disparities and advance equity in MEB health outcomes among children from health disparity and other vulnerable populations. NCCIH is also interested in applications that include a focus on strategies to support multicomponent approaches to address MEB outcomes, academic outcomes, and physical health outcomes (e.g., sleep disturbances, obesity, physical activity) to promote whole child health. NCCIH will not accept efficacy or effectiveness (including Type 1 hybrid designs) trials research through this NOSI (instead please see [NCCIH Clinical Trial Funding Opportunities](#)).

National Institute of Mental Health (NIMH)

NIMH encourages research that proposes effectiveness and implementation hybrid designs that examine core components of the MEB preventive interventions and implementation strategies delivered in school settings. Primary goals will identify targets and mechanisms that contribute to the effectiveness of MEB preventive interventions and test implementation strategies to improve uptake, scale-up, and sustainability of effective interventions in school settings. Secondary goals will examine MEB outcomes (e.g., mental health, functioning, academics).

NIMH is interested in supporting studies on research topics listed below:

- Test scalable versions of prevention interventions that target core common substrates (i.e., trans-diagnostic risk factors designed to have an effect on a broad array of behaviors) that place youth at risk for a range of disorders (e.g., externalizing and/or internalizing disorders).
- Examine technology-assisted approaches to deliver low-intensity, first-line interventions or to facilitate the delivery of in-person interventions.
- Examine strategies that target developmental transitions that represent opportune times for the implementation of prevention interventions.
- Evaluate the utility of decision-aids for matching youth to interventions of appropriate intensity/dose.
- Examine factors that facilitate or impede intervention effectiveness and successful implementation of prevention interventions (e.g., at the level of the organization, providers, families, etc.).
- Test different strategies that can be used to train providers to competence and to support them in delivering interventions with fidelity.
- Optimize interventions and implementation approaches by testing implementation strategies and their alignment with school programs, policies, leadership, and settings.
- Test strategies that can be used to reduce health disparities and advance health equity in mental health interventions, services, and outcomes for racial and ethnic minority groups, individuals limited by language or cultural barriers, sexual and gender minorities, individuals living in rural areas, socioeconomically disadvantaged persons, and other underserved groups.

For research on the effectiveness of interventions or services, NIMH requires a study design using an experimental therapeutics approach, in which clinical trials test intervention effects on mental health outcomes as well as elucidate the intervention's mechanism(s) of action. Clinical trial proposals that do not adhere to the experimental therapeutics framework will be considered non-responsive to this FOA. Therefore, applications must specify intervention target/mechanism and assess whether intervention-induced changes in the target account for the hypothesized outcome. In the case of services interventions, targets/mechanisms might involve change in service-user, family and/or provider behavior, or in organizational/system-level factors to improve access, engagement, continuity, quality, equity, and/or value of services. Studies adapting interventions for racial and ethnic minority populations (e.g., American Indians/Alaska Natives, Asian Americans, Blacks/African Americans, Hispanics/Latinos, and Native Hawaiians and other Pacific Islanders), sexual and gender minorities, socioeconomically disadvantaged populations, and underserved rural populations should provide an empirical rationale for the adaptation/augmentation target and a clear hypothesis and plan to address the target mechanism by which the adapted intervention will enhance outcomes. See the [Support for Clinical Trials at NIMH](#) web page for additional information.

***Eunice Kennedy Shriver* National Institute of Child Health and Human Development (NICHD)**

NICHD has particular interest in research on minoritized and underserved populations falling within the NICHD scientific mission area, including school-aged children and adolescents (e.g., ages 5-17) with physical and/or intellectual disabilities; children who are homeless or in foster care, children who have been involved in the welfare or justice systems; and children living in disadvantaged or rural communities. Dissemination and implementation research that seeks to advance the uptake, scale-up, and sustainability of multi-component programs that target multiple developmental outcomes are of high interest.

Additional research topics of interest to NICHD that fall within the scope of this NOSI include, but are not limited to, implementation and dissemination research, including effectiveness and implementation hybrid

designs in low resource school settings (schools in which up to at least 40% of enrollment are eligible to use Title I funds) or schools that serve NIH designated health disparity populations that seeks to advance implementation of programs, practices, and policies that:

- Address children and youth's experiences of racism or discrimination
- Promote children's safe media use (including bullying bystander training)
- Support children's positive identities (e.g., racial, ethnic, gender, disability, cultural, etc.)
- Increase children's health literacy (e.g., hygiene behaviors, health education, including nutrition, physical activity, sexual and reproductive health, stress management, sleep hygiene, environmental health knowledge and stewardship)
- Promote children's emotion regulation, emotional intelligence skills (e.g., including mindfulness and meditation training) and social and emotional learning (SEL)
- Reduce inequitable disciplinary practices and promoting novel, effective alternatives to addressing problem behaviors
- Prevent dating violence and promoting healthy, positive relationships and effective conflict resolution approaches
- Reduce aggression and violence among peers and target bullying
- Promote child and adolescent creativity (e.g., imaginative or pretend play, creative problem solving, positive risk taking, art-based trainings such as painting, drawing, dancing, singing, storytelling or creative drama-based games or trainings) to enhance social and emotional development

National Institute on Minority Health and Health Disparities (NIMHD)

The mission of NIMHD is to lead scientific research to improve minority health and reduce health disparities. Populations that experience health disparities of interest to NIMHD include African Americans/Blacks, Hispanic/Latinos, American Indians/Alaska Natives, Asians, Native Hawaiians, and Pacific Islanders, socioeconomically disadvantaged populations, underserved rural populations, and sexual and gender minority populations. In the context of this FOA, NIMHD is especially interested in innovative multi-disciplinary and multi-level (e.g., individual, community, health care system) approaches to promote MEB health among children and youth from populations affected by health disparities. (hence, underserved youth)

Examples of potential topic areas include but are not limited to:

- Implementation care delivery intervention models (including telehealth) that target social determinants of health (SDoH) to mitigate risks to MEB health and promote healthy MEB development in underserved youth.
- Differential impact of interventions to address MEB development for sexual and gender minority youth, immigrant youth, and youth who reside in rural areas.
- Multi-generational cultural approaches to mitigate risks to MEB health and improve access to MEB services.
- Studies of mechanistic pathways to promote MEB health and resilience among underserved youth.
- Development of culturally and developmentally appropriate metrics to reliably measure MEB health status and outcomes of underserved youth.
- Evaluation of federal and state policies (e.g., family leave) on promotion of MEB development and disorder prevention, access to health services, and utilization rates among underserved youth.
- Studies to address immediate and long-term effects of COVID-19 pandemic and disasters (e.g., community violence/school shootings; hurricanes) on the MEB development of underserved youth.

The Office of Disease Prevention (ODP)

The [Office of Disease Prevention \(ODP\)](#) is the lead office at the NIH responsible for assessing, facilitating, and stimulating research in disease prevention. In partnership with the 27 NIH Institutes and Centers, the ODP strives to increase the scope, quality, dissemination, and impact of NIH-supported prevention research. The ODP is interested in providing co-funding support for research that has strong implications for disease and injury

prevention and health equity and that include innovative and appropriate research design, measurement, and analysis methods. Furthermore, the ODP has a specific interest in projects that develop and/or test preventive interventions. For this NOSI, ODP is interested in supporting research to address SDOH-related barriers and facilitators to implementation and sustainability of mental, emotional, and behavioral (MEB) health preventive, evidence-based interventions (EBIs) in school settings. EBIs may come from the [U.S. Preventive Services Task Force](#), the [Community Preventive Services Task Force](#), [Healthy People 2030](#), or from other EBI sources. For additional information about ODP's research priorities and interests, please refer to the [ODP Strategic Plan for Fiscal Years 2019–2023](#).

The ODP does not award grants; therefore applications must be relevant to the objectives of at least one of the participating NIH Institutes and Centers (IC) listed in this announcement. Please contact the relevant IC Scientific/Research Contact(s) listed for questions regarding IC research priorities and funding.

Office of Research on Women's Health (ORWH)

ORWH is part of the Office of the Director of NIH and works in partnership with the 27 NIH Institutes and Centers to ensure that women's health research is part of the scientific framework at the NIH and is supported in the larger scientific community. Also, ORWH has an interest in research focused on populations experiencing health inequities, including groups of women and girls who are understudied, underrepresented, and underreported in research. It is well-documented that children affected by poverty, neighborhood incivility and under resourced or poor-quality schools have fewer opportunities to develop the foundation for optimal mental, physical, and social health later in life. They are also at greater risk for early onset mental, emotional, and behavioral (MEB) disorders, lower school achievement, and child welfare or juvenile justice system involvement, each of which threatens the health and well-being of the affected children, their families, and communities. There is strong evidence for the effectiveness of school-based interventions, particularly those that offer therapeutic activities to foster individual level behavior change alongside efforts to enhance classroom management, reduce bullying, and lessen disciplinary imbalances. In recognition of the need for the integration of effective services to promote mental, emotional and behavioral health in the educational context, and for such services to be tailored to account for the specific social and emotional needs of disadvantaged students, ORWH is interested in providing support for multicomponent/multilevel interdisciplinary, behavioral, clinical, and/or translational studies exploring disparities in educational (e.g., school disciplinary practices) and MEB disorders, their interaction and the implementation of complementary and integrative health strategies to promote healthy MEB development. Proposals seeking to intervene on multiple levels (i.e. provide specialized training for teachers and staff on accommodating students with behavioral health issues, anti-bullying interventions for the student body and school-based family interventions targeting parenting skills and in-school achievement/behavior), showing strong evidence of efficacy for MEB health (e.g. mediation/mindfulness-based interventions, music-, art- and drama therapy) and incorporating intersectional analyses are of particular interest; as are those using sex and/or gender-sensitive and contextually relevant approaches. For additional guidance, please refer to the 2019-2023 Trans-NIH Strategic Plan for the Health of Women on the ORWH website (<https://www.nih.gov/women/strategicplan>).

The Office of Behavioral and Social Sciences Research (OBSSR)

The Office of Behavioral and Social Sciences (OBSSR) does not accept assignment of applications or manage awards that are funded. Please contact one of the ICs listed below for inquiries regarding the suitability of the proposed project for the FOA and the IC's research portfolio.

Applications Not Responsive to this NOSI

- Studies to develop, pilot, or test the efficacy of new MEB preventive or treatment interventions
- Studies that focus on the implementation of programs, practices or policies related to tertiary/indicated prevention and treatment of MEB disorders

Application and Submission Information

Applicants must select the IC and associated FOA to use for submission of an application in response to this NOSI. The selection must align with the IC requirements listed in order to be considered responsive to that FOA. Non-responsive applications will be withdrawn from consideration for this initiative. In addition, applicants using NIH Parent Announcements (listed below) will be assigned to those ICs on this NOSI that have indicated those FOAs are acceptable and based on usual application-IC assignment practices.

This notice applies to due dates on or after June 5th, 2022 and subsequent receipt dates through June 5, 2024.

Submit applications for this initiative using one of the following funding opportunity announcements (FOAs) or any reissues of these announcement through the expiration date of this notice.

| FOA | FOA Title | First Available Due Date | Expiration Date | Participating IC(s) |
|----------------------------|--|---------------------------------|------------------------|----------------------------|
| PAR-19-274 | Dissemination and Implementation Research in Health (R01 Clinical Trial Optional) | June 5, 2022 | May 8, 2022 | NCCIH, NICHD, ORWH |
| PAR-19-276 | Dissemination and Implementation Research in Health (R03 Clinical Trial Not Allowed) | June 5, 2022 | May 8, 2022 | NCCIH, NICHD, ORWH |
| PAR-19-275 | Dissemination and Implementation Research in Health (R21 Clinical Trial Optional) | June 5, 2022 | May 8, 2022 | NCCIH, NICHD, ORWH |
| PAR-20-150 | NIMHD Exploratory/Developmental Research Grant Program (R21 Clinical Trial Optional) | June 16, 2022 | May 8, 2023 | NIMHD |
| PA-20-172 | Long-Term Effects of Disasters on Health Care Systems Serving Health Disparity Populations (R01 Clinical Trial Optional) | June 5, 2022 | September 8, 2023 | NIMHD |
| PA-20-185 | NIH Research Project Grant (Parent R01 Clinical Trial Not allowed) | June 5, 2022 | May 8, 2023 | NIMHD |
| PAR-20-310 | Health Services Research on Minority Health and Health Disparities (R01 Clinical Trial Optional) | November 17, 2022 | March 28, 2023 | NIMHD |
| PAR-21-129 | Clinical Trials to Test the Effectiveness of Treatment, Preventive, and Services Interventions (Collaborative R01 Clinical Trial Required) | June 15, 2022 | February 16, 2024 | NIMH |
| PAR-21-130 | Clinical Trials to Test the Effectiveness of Treatment, Preventive, and Services Interventions (R01 Clinical Trial Required) | June 15, 2022 | February 16, 2024 | NIMH |
| PAR-21-131 | Pilot Effectiveness Trials for Treatment, Preventive and | June 15, 2022 | February 16, 2024 | NIHM |

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|----------------------------|--|---------------|-------------------|-------|
| | Services Interventions (R34 Clinical Trial Required) | | | |
| PAR-21-287 | Effectiveness of School-Based Health Centers to Advance Health Equity (R01 Clinical Trial Optional) | June 5, 2022 | January 8, 2025 | NIMHD |
| PAR-21-316 | Innovative Mental Health Services Research Not Involving Clinical Trials (R01 Clinical Trials Not Allowed) | June 5, 2022 | September 8, 2024 | NIMH |
| PAR-22-082 | Pilot Services Research Grants Not Involving Clinical Trials (R34 Clinical Trial Not Allowed) | June 16, 2022 | May 8, 2025 | NIMH |

All instructions in the [SF424 \(R&R\) Application Guide](#) and the funding opportunity announcement used for submission must be followed, with the following additions:

- For funding consideration, applicants must include “**NOT-AT-22-004**” (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.

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

Applicants planning to submit an application in response to this NOSI are strongly encouraged to contact and discuss their proposed research/aims with an NIH Program Officer listed on this NOSI well in advance of the grant receipt date.

Inquiries

Please direct all inquiries to:

Scientific/Research Contact(s):

NCCIH:

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Peer Review Contact(s):

Examine your eRA Commons account for review assignment and contact information (information appears two weeks after the submission due date).

Financial/Grants Management Contact(s)**NCCIH:**

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