

## Intervention-and-Implementation Science Pilot Awards

### Department of Epidemiology at Columbia's Mailman School of Public Health, in collaboration with the Irving Institute for Clinical and Translational Research

#### Overview and Intent

The Intervention-and-Implementation Science Pilot Awards Program is a key capacity building opportunity to stimulate the development and testing of: (1) innovative population health, public health, or medical/clinical interventions and (2) implementation of evidence-based population health, public health, or medical/clinical interventions that have been shown to work, but have not been widely adopted, implemented or sustained in diverse and real-world global, community, clinical/health systems or policy settings. Epidemiologic, public health and clinical sciences have a long history as a force for positive social and biological change, intervening to interrupt and prevent disease, identifying solutions to difficult community-level problems, and scaling-up these solutions to protect and improve the health, safety, and wellbeing of whole populations. While study of the distribution and determinants of health is vital, it is incumbent upon epidemiology, public health science and clinical medical practice to equally elevate and promote the discovery of new knowledge to innovatively intervene on disease, produce new actions that improve and promote health, and determine the best ways to disseminate, implement, scale-up, and sustain these actions to offer population and clinical benefits beyond the laboratory or any one community. This program offers early resources for pilot, proof-of-concept projects to be conducted "in miniature", ultimately leading to larger intervention or implementation science projects and producing new knowledge that directly impacts population health, supported by larger extramural funds.

#### Pilot Award Details

- Duration: One year
- Award amount: \$25,000-75,000
- Number of awards: Approximately 3-5, depending on funding availability

#### Eligibility and Guidance

- 1) Applicants must be full-time faculty at the rank of assistant professor or higher from one of the schools or institutes across Columbia University Irving Medical Center
- 2) Preference will be given to pilot proposals that seek to test interventions or apply implementation science strategies. This includes community and population health strategies (e.g. housing, built environment, land, water, food, climate, information technology, transportation, poverty, etc.), clinical strategies (e.g. clinics, hospitals, healthcare systems), psychosocial and behavioral strategies, and potentially other strategies.
- 3) For **intervention pilot proposals**, preference will be given to the development and/or pilot testing of interventions with the intention of preparing larger grants involving randomized controlled trials; quasi-experimental and other designs will also be considered. For **implementation science pilot proposals**, we will prioritize compelling prior evidence demonstrating effectiveness or efficacy of the intervention to be implemented, such as multiple completed randomized controlled trials and/or quasi-experiments. A range of hybrid I, II, or III designs is encouraged for implementation studies, using the framework from Curran, et al. 2013: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3731143/>, as well as quasi-experimental designs.
- 4) Pilot studies including primary data collection, mixed methods (qualitative + quantitative approaches), the use of mobile health technology, and/or the analysis of biosamples are encouraged; collaboration with other disciplines and/or experienced intervention/implementation scientists is also highly recommended.
- 5) Pilot proposals must include 2-4 specific aims with the final specific aim listing the date of submission for a larger, extramurally funded grant proposal with the lead investigator of the pilot as PI or first contact PD/PI in an MPI arrangement. At least one senior scientist must be included on the research team. We encourage interdisciplinary teams and inclusion of early career investigators on teams.
- 6) Before starting the application, query emails to [epi-grants@cumc.columbia.edu](mailto:epi-grants@cumc.columbia.edu) (Epidemiology Department) and [irvinginst\\_implement@cumc.columbia.edu](mailto:irvinginst_implement@cumc.columbia.edu) (CTSA) are welcome.

#### Deadlines and Submission

- Intervention-and-Implementation Science Pilot Award applications due **on or before 5pm, August 30, 2019**.
- Send proposal to [epi-grants@cumc.columbia.edu](mailto:epi-grants@cumc.columbia.edu) as a single, 5-page PDF document with no smaller than single-spaced, 11.5-point Arial font including each of the following sections: (a) 1-page devoted to a summary and specific aims, (b) 1-page devoted to significance and innovation, (c) 2-pages for research methods and human subjects, (d) 1-page for budget justification and timeline (with 6 month and final progress report deadlines, and larger grant submission dates to an intended funding agency), and key personnel biosketches.
- Funded applicants will be notified 6-8 weeks after the August 30, 2019 due date and would begin their projects at that time or as soon as appropriate approvals are in place (e.g., IRB, if required).