



University at Buffalo

Community Health Equity  
Research Institute

# Community Health Equity Pilot Studies Program

## Request for Proposals from Early Career Investigators

The UB Community Health Equity Research Institute is offering pilot studies grants for projects to support research in health equity and adverse social determinants of health (SDOH). In this funding cycle, the Institute will fund projects **up to \$100,000 for one year**.

### Eligibility:

- **Early-stage investigators with appointments at UB**
- **Postdoctoral Fellows in UB research groups**
- **Faculty and Fellows from all 12 UB schools are invited to apply**

The Principal Investigator (PI) must be an early-stage investigator (ESI). An ESI is defined as an individual who has completed their terminal research degree or end of post-graduate clinical training, whichever date is later, within the past 10 years and who has not previously competed successfully as PD/PI for a substantial NIH independent research award. See [list of NIH grants that a PD/PI can hold and still be considered an ESI](#).

We encourage applicants to work with mentors who are established investigators with a history of funding and can serve as co-investigators on the project. Note that it is not necessary to include a mentor on the proposal. We can assist with connecting applicants with mentors.

**Health inequities** are preventable differences in the burden of disease and opportunities to achieve optimal health that are experienced by socially disadvantaged populations. The term “disparities” refers to disproportionate health outcomes, while the term “health inequity” stresses the injustice and oppression that underlies these differences. The root causes of health inequities are often **social determinants of health** (SDOH), the conditions in which people live, work, learn and play. They are typically found in underdeveloped neighborhoods and communities and are often driven by systemic structural racism. The root causes of health inequities are institutional and societal conditions, practices and policies that create the social determinants that result in adverse health outcomes.

One of the most pressing problems in Buffalo is race-based health inequities, a condition shared with many American metropolitan areas. While proposals addressing health inequities in all marginalized populations are welcome and encouraged, priority will be given to outstanding projects that address health inequities in Buffalo’s African American community.

**Applying for pilot studies funding involves a two-tiered process:** 1) submission of a Letter of Intent (LOI), and 2) submission of a full proposal, if invited, following review of the LOIs.

Community Health Equity Research Institute

Clinical and Translational Research Center  
875 Ellicott Street, Buffalo, NY 14203

Proposed studies should address health inequities and the role of SDOH in health equities. SDOH include, but are not limited to:

- Poverty
- Educational opportunity
- High unemployment
- Poor housing stock
- Limited access to healthy food
- Limited access to healthcare
- Underdeveloped neighborhoods
- Unhealthy home and neighborhood built environments
- Criminal justice system
- Access to WiFi/Internet (digital divide)
- Access to public transportation
- Access to recreational facilities and greenspace
- Discrimination
- Environmental exposures, including climate change impacts

An **Informational Session** on tips for success in obtaining community health equity pilot studies will be held on **February 10, 2026 at 12PM** by Zoom. Anyone applying for pilot studies funding is strongly encouraged to attend. Questions about the submission process or scope of the RFA can be sent to Chantazia Bronson at [chantazi@buffalo.edu](mailto:chantazi@buffalo.edu)

Link to register: <https://buffalo.zoom.us/meeting/register/Y2Tz6lu7RNeXsu7UUwUXdA>

## **Letter of Intent Submission (2-page limit)**

### **Page 1**

- a. Succinct title for the proposal
- b. List of names and affiliations of all investigators, including community partners, involved in the project

### **Page 2**

Provide a succinct abstract of the proposal, summarizing:

- a. The problem to be solved and your approach to solving the problem
- b. How the pilot study and the larger program of research will contribute to changing structures and systems with the aim of reducing health inequities
- c. Your community engagement plan
- d. How the pilot study will lead to future extramural funding, including identifying one or more target funding mechanisms

## **Successful pilot studies proposals will meet the following three objectives:**

1. They will address root problems that underly adverse SDOH and health inequity. While mitigating health inequities is important, the intent of this pilot studies program is to address underlying root causes that will lead to institutional and systemic changes.
2. They will involve at least one community-based partner. The UB Community Health Equity Research Institute prioritizes community-based participatory research, which involves the community in the entire project from planning the project, to conducting the study, to reporting and benefiting from the results. We can assist in finding community partners upon request.

3. They are designed with the goal of achieving larger scale extramural funding. The scope of projects to address root causes of adverse SDOH and lead to systemic change will need to be greater than what a pilot study can support. The intent is that the pilot studies will produce data that will strengthen larger proposals. The pilot proposal should articulate a clear plan for future substantive extramural funding, for example, individual mentored career development K awards, a federal or foundation grant such as an NIH R01, National Science Foundation grant, Robert Wood Johnson Foundation grant and others.

#### **Format**

Letters of Intent must be submitted as a single PDF in Arial 11-point font, single-spaced text, 0.5-inch margins. **Submissions must be emailed to [commegty@buffalo.edu](mailto:commegty@buffalo.edu)**. Applicants will be notified with a decision as to whether their proposal has been selected to move forward to the second tier of the application process **March 16, 2026**.

#### **Timeline**

<b>Request for proposals released</b>	January 30, 2026
<b>Informational Session</b>	February 10 <sup>th</sup> at 12pm
<b>Letters of intent due</b>	March 6, 2026, by 5:00 PM
<b>Invitations to successful applicants to submit full proposals</b>	Mid-March 2026
<b>Presentation to Community Advisory Board</b>	Early April 2026
<b>Full proposals due</b>	April 30, 2026, by 5:00 PM
<b>Notification to applicants</b>	Mid-May 2026
<b>Funding start date</b>	July 1, 2026

**Instructions for full submissions are provided in the pages that follow.**

### **Full Proposal Submission (by invitation only)**

Invited applicants should use the current application page limits for NIH R03 small grant applications (half inch margins, minimum 11-point font).

### **Specific Aims (1-page limit)**

- State concisely the goals of the proposed research and summarize the expected outcome(s), including the impact that the results of the proposed research will have on the research field(s) involved. Note the health inequity(ies) or social determinant(s) of health that the project will address.

### **Research Strategy (6-page limit using the following headings)**

- **Significance:** Explain the importance of the problem or critical barrier to progress that the proposed project addresses. Describe the strengths and weaknesses in the rigor of the prior research (both published and unpublished) that serves as the key support for the proposed project. Explain how the proposed project addresses health equity.
- **Innovation:** Explain how the application challenges and seeks to shift current research or clinical practice paradigms. Describe any novel theoretical concepts, approaches or methodologies, or interventions to be developed or used, and any advantage over existing methodologies or interventions.
- **Approach:** Describe the overall strategy, methodology, and analyses to be used to accomplish the specific aims of the project. Describe the experimental design and methods proposed and how they will achieve robust and unbiased results. For trials that randomize groups or deliver interventions to groups, describe how your methods for analysis and sample size are appropriate for your plans for participant assignment and intervention delivery. Discuss potential problems, alternative strategies, and benchmarks for success anticipated to achieve the aims. If the project is in the early stages of development, describe any strategy to establish feasibility, and address the management of any high-risk aspects of the proposed work.
- **Plan for extramural funding for a larger project:** Explain how the pilot study will lead to future extramural funding, including identifying one or more target funding mechanisms.

Also, please provide the following:

- **Bibliography**
- **Biosketches/Resumes**
  - Faculty and postdoctoral applicants should provide NIH Biosketches for the Principal Investigator and any Co-investigators. The personal statements for each investigator should make clear their role as it pertains to this project. Digitally certified PDFs of biosketches may be produced using [SciENCv \(https://www.ncbi.nlm.nih.gov/sciencv/\)](https://www.ncbi.nlm.nih.gov/sciencv/).
  - Community partners involved in the proposed study should provide a current resume.
  - There is a 5-page limit for each biosketch/resume

- **Budget and Justification**

- Budgets should be up to \$100,000 in direct costs; indirect costs will not be supported. All costs needed for the project must follow the [Uniform Guidance Cost Principles](https://www.ecfr.gov/current/title-2/subtitle-A/chapter-II/part-200/subpart-E) (<https://www.ecfr.gov/current/title-2/subtitle-A/chapter-II/part-200/subpart-E>) and must be allowable, reasonable, allocable and consistent. Please note that faculty salaries/fringe and tuition are not allowable expenses on pilot awards. Salary for staff, students, postdocs, supplies and small equipment that is necessary for the project are allowed. The combined budget and justification is limited to 2 pages.

**Note:** Projects using vertebrate animals cannot be supported under this Pilot Project Program.

**Format**

Full proposals should be submitted as a single PDF in Arial 11-point font, single-spaced text, 0.5-inch margins. Proposals must be emailed to [commeqty@buffalo.edu](mailto:commeqty@buffalo.edu). All applicants will be notified with a decision as to whether their proposal has been selected for funding and will receive reviewer comments.

**Central Study Registration**

The principal investigator must register their study with [Central Study Registration](#) (CSR) *prior to submission of the full proposal*. Exceptions are noted below. To begin the CSR process, a proposal document (at minimum) is required. It is not necessary to submit an IRB proposal at this stage. For any questions regarding CSR registration, please contact the [CTSI Clinical Research Facilitators \(829-4357\)](#). Due to reporting requirements, chart reviews *must be registered* with CSR.

- The HRP-503-Protocol template can be found in the [CLICK portal](#), within the IRB Library section, under the “Templates” tab.

Please note the following **exceptions** to CSR Registration HRP-503 protocols:

- If you plan to submit your protocol to the IRB for determination of “Not Human Subjects Research”.
- If you will seek “Exempt Status” from the IRB for your study.

If bypassing CSR, please leave a comment in Click indicating you are seeking one of the above listed determinations. This will allow the IRB intake coordinator to know your study should not be returned for registration.

**Presentation to CHERI’s Community Advisory Board**

PIs invited to submit full proposals will be required to present a brief summary of their projects to the Community Health Equity Research Institute Community Advisory Board (CAB) **in early April 2026**. This group of community leaders will provide feedback on the project approach and potential for impact. A summary of the CAB’s feedback will be provided to the researchers within one week of the presentation. While researchers will not be evaluated on their presentation, they will be expected to be responsive to the CAB feedback and indicate how they have responded to the CAB feedback in the application.

## **Review Process**

Applications will be reviewed by independent reviewers and rated using the following criteria:

- a. Scientific merit and innovation
- b. Incorporation of community into the research process and engagement plan
- c. Potential for contributing to the reduction of structural and systemic causes of health inequities
- d. Potential for reducing health inequities
- e. Responsiveness to Community Advisory Board feedback
- f. Potential for securing extramural funding
- g. Potential for advancing the career of the early-stage investigator applicant
- h. Realistic milestones and feasibility of completion within the requested time frame
- i. Rationale and use of proposed budget

## **Conditions for Awarded Pilot Projects**

The following are required of every pilot study PI:

- a. Attend a virtual “on-boarding” session regarding requirements associated with funding and award. The PI and appropriate administrative staff must attend before funds will be released and before the project will begin.
- b. Complete training in health equity research.
- c. Submit quarterly progress reports and a final report on the status of the budget and the aims using the form that will be provided.
- d. Present a brief update of your project to the Community Advisory Board six months after funding begins.
- e. Submit brief progress reports yearly following the project end date, for three years, using a form that will be provided.
- f. Present findings at the annual Community Health Equity Institute Research Day.
- g. Serve as a reviewer of future proposals submitted to this Pilot Studies Program.

## **Required Disclaimer**

All investigators are encouraged to submit findings to an academic peer-reviewed journal or discipline-specific publication within two years of the pilot project end date. Any publication, press release or presentation resulting from the pilot funding must acknowledge the Community Health Equity Research Institute in a disclaimer such as:

The research reported in this publication/press release/presentation was supported by an award from the Community Health Equity Research Institute Pilot Project Program and the National Institute On Minority Health And Health Disparities of the National Institutes of Health under Award Number P50MD019473. The content is solely the responsibility of the authors and does not necessarily represent the official views of the National Institutes of Health.

## **Community Health Equity Research Institute Contacts**

Chantazia Bronson, MPH  
Program Operations Manager  
[Chantazi@buffalo.edu](mailto:Chantazi@buffalo.edu)

Heather Gardiner, PhD, MPH  
Principal Investigator  
[hmm6@buffalo.edu](mailto:hmm6@buffalo.edu)