

**U.S. ARMY MEDICAL RESEARCH AND MATERIEL COMMAND (USAMRMC)  
CONGRESSIONALLY DIRECTED MEDICAL RESEARCH PROGRAMS (CDMRP)  
REQUEST FOR INFORMATION (RFI)  
PROSTATE CANCER RESEARCH PROGRAM (PCRP)**

**Background**

The US Army Medical Research and Materiel Command (USAMRMC) is a major subordinate Command of the United States Army Medical Command. The USAMRMC directs the management of a number of medical research, development, and acquisition programs, and began managing the Prostate Cancer Research Program (PCRP) in fiscal year 1997 (FY97). Since then, the PCRP has received a total of \$970 million in congressional appropriations to promote innovative research focused on conquering prostate cancer. The primary objective of the PCRP is to fund innovative, high-risk/high-impact research aimed at the prevention, detection, diagnosis, and/or treatment of human prostate cancer. The program supports both individual investigators and multidisciplinary team science. Award mechanisms encompass basic, translational, and clinical research, and include emphasis on prostate cancer health disparities research.

The PCRP recognizes that African American men are at higher risk for being diagnosed with prostate cancer and, once diagnosed, are twice as likely to die from the disease as Caucasian men. The cause of the increased prostate cancer morbidity and mortality in African Americans is poorly understood; some studies have pointed to genetic factors, while others have implicated socioeconomic status as a cause of health disparity. Therefore, a major goal of the PCRP is to fund research on disproportionately affected populations to identify underlying factors that contribute to the disparity and to find ways to alleviate this burden.

By understanding the needs of the prostate cancer research community, the PCRP will be best prepared to continue to develop new program priorities and create new funding opportunities to support research on prostate cancer health disparities and find the solutions that are needed to improve diagnosis, treatment, and prevention of prostate cancer, and improve patient quality of life. Therefore, **the PCRP is requesting input from the scientific community in an effort to identify opportunities to enhance support for health disparity research.** This request for information (RFI) focuses on opportunities toward general support for health disparity research, resource development, infrastructure, and leveraging PCRP resources.

This RFI invites input from all Department of Defense (DOD) PCRP applicants and awardees, as well as the general prostate cancer research community. **Institutions with enhanced access to disproportionately affected populations and/or with active health disparity research programs are highly encouraged to respond.**

Information provided in response to this RFI will be used by the PCRP for internal planning purposes only. Therefore, this RFI does not represent a solicitation for proposals or any obligation on the part of the CDMRP or the DOD. Furthermore, the PCRP will neither use the information submitted to this RFI as a basis for which to make awards nor pay for information submitted.

## How to Respond

Please limit your responses to 5 pages and label them PCRFP FY09 RFI-001. Please provide responses in an electronic format and submit them via email to carolyn.best2@amedd.army.mil. A confirmation email will be sent in reply to each RFI response that is received. Responses will be accepted until 5:00 p.m. Eastern time, August 31, 2009.

## Requested Information

1. Provide the name of the institution with which you are affiliated.

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Check any of the following designations that best describe your institution:

Historically Black Colleges and Universities (HBCU)

Hispanic Serving Institutions (HSI)

Tribal Colleges and Universities (TCU)

Non-Minority Institution

Other

2. Specify your highest degree:  M.D.  Ph.D.  D.Ph./D.Sc.  Other
3. Identify your level of experience as a prostate cancer investigator.  
 Senior Postdoctoral Scientist (minimum 3 years postdoctoral research)  
 Transitioning Investigator (within 3 years of first faculty appointment)  
 Early Career Investigator (within 6 years of first independent faculty appointment)  
 Established Investigator – Untenured (more than 6 years of independent research)  
 Established Investigator – Tenured
4. Does the research in your laboratory involve the study of prostate cancer health disparities?  
 Yes  No  
(If yes, please identify the proportion of your work focused on health disparity: \_\_\_\_%)
5. Estimate the number of investigators at your institution that have 4 or more years of health disparity research experience?  
 < 5  
 5 – 10  
 > 10
6. Do you think there is an unmet need in support of prostate cancer health disparity research?  
 Yes  No  Undecided
7. Indicate whether you have ever applied for any of the following PCRFP award mechanisms.  
*Check all that apply.*  
 Health Disparity Research Award  
 Health Disparity Training Award  
 HBCU Collaborative Partnership Award  
 Collaborative Undergraduate HBCU Student Summer Training Program Award

8. If you have applied for one of the PCRCP awards listed in question 7, please indicate whether or not your application was recommended for funding, and if not recommended for funding, whether you would apply again if the award mechanism was offered.

*Please circle the appropriate response.*

- My application was/was not recommended for funding.
- I do/do not plan to apply again.

9. If you have never applied for one of the PCRCP awards listed in question 7, please provide the reason. Select all that apply, and rank them in decreasing order of importance, with 1 being the most important reason for not applying for PCRCP awards:

I was unaware of the funding opportunities.

My research does not fit the award mechanisms.

The application process is too difficult. Please specify which part(s) of the process:

\_\_\_\_\_  I do not have the appropriate collaborators.

\_\_\_\_\_  I do not have sufficient institutional resources.

\_\_\_\_\_  I do not have connections or access to disproportionately affected populations.

\_\_\_\_\_  It is too difficult to obtain funding (i.e., too much competition).

\_\_\_\_\_  Other, please specify: \_\_\_\_\_

10. If you do not study prostate cancer health disparity, or study it with less than 50% effort, would you be likely to add or increase effort if there were more funding available for prostate cancer health disparity research?

Yes  No

11. Indicate the types of resources that would be most useful to you in carrying out research focused on prostate cancer health disparities.

*Check as many as needed and list others that may be missing.*

Infrastructure resources (equipment, computers, databases)

Reagents (cell lines, tissue blocks, animal models, agents/drugs, etc.)

Methodological support (statistical, computational, etc.)

Increased institutional release time for research

Increased institutional support (e.g., matching funds, personnel)

Collaboration

Access to patients

\_\_\_\_\_  Other, please specify: \_\_\_\_\_

12. If you had access to increased support for prostate cancer health disparity research, indicate the types of studies that you would conduct. Please check all that apply.

Basic discoveries

Translational studies

Clinical studies or  Clinical Trials

Behavioral

Prospective

Retrospective

Other

Epidemiological

Population genetics

\_\_\_\_\_  Other, please specify: \_\_\_\_\_

13. The PCRP uses various award mechanisms to support innovative, high-impact, hypothesis-driven studies. Indicate which types of funding approaches you think would be most effective to significantly enhance prostate cancer health disparity research. Prioritize the list, using “1” for the best approach.
- Training
- Individual Investigator
- Multidisciplinary Collaboration Required
- Consortium with multiple investigators and institutions
- Partnerships between HBCUs and institutions with established prostate cancer research programs
- Partnerships with affected populations via membership organizations (Examples: Urban League, National Medical Association, National Alliance for Hispanic Health, American Indian Health Care Association, National Rural Health Association, Patient Advocate Foundation National African American Outreach Program, Prostate Health Education Network [PHEN], The Prostate Net)
- Other, please specify: \_\_\_\_\_
14. Do you believe minority institutions/colleges such as HBCUs, HSIs, and TCUs are in an advantageous position to conduct health disparity research?  Yes  No  Undecided
- Please explain your answer on a separate page.*

***For questions 14-17, please provide your answers on a separate page.***

15. Describe the type(s) of institutional support that you believe to be important to facilitate success of health disparity research.
16. Describe the capabilities of your institution, department, and/or laboratory that best enable the conduct of prostate cancer health disparity research.
17. Describe the capabilities of your institution, department, and/or laboratory that would enable your participation in *multi-institutional collaborative* research projects focused on prostate cancer health disparity.
18. Identify areas in prostate cancer research that you believe are neglected or currently under-investigated in health disparity. Indicate whether these areas are low priority, moderate priority, or high priority, and provide reasons for your ranking.

For questions related to this RFI, please contact:

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