

## Call for Core Research Project proposals for the Injury Prevention Research Center at Emory's Competitive Renewal for 2024-2029

The CDC-funded [Injury Prevention Research Center](#) at Emory (IPRCE) is seeking proposals for 4 core research projects that would be funded through its 5-year competitive renewal. Projects will run for either 2 or 3 years (from either 2024-2026 or 2026-2029). To promote equity and transparency in the selection process, we are soliciting abstracts from investigators interested in leading one of these 4 core research projects.

Injury – including violence and overdose – is a leading cause of morbidity and mortality in the US, with striking inequities in its incidence and consequences. IPRCE was founded in 1993 as the Emory Center for Injury Control and has a long history of conducting research, education, and outreach aligned with its mission to reduce injury in Georgia and the Southeastern United States. IPRCE achieves its mission by actively engaging and supporting over 80 core faculty members spanning Emory and multiple other universities in Georgia, and by supporting over 400 members of the injury prevention community who participate in volunteer task forces focused on preventing violence, falls, overdose, transportation injury, and traumatic brain injury as well as the development and implementation of interventions.

IPRCE's competitive renewal application will be submitted to the CDC in December of 2022. This renewal application will include outreach and education activities in addition to 4 core research projects. We are soliciting ideas from interested investigators for these 4 core research projects. Successful projects will:

- (1) Use rigorous methods to address at least one of the [CDC research priorities](#) for prevention of Adverse Childhood Experiences, Drug Overdose, Suicide Prevention, Older Adult Falls, Transportation Safety, Traumatic Brain Injury, Cross-Cutting Violence Prevention, Child Abuse and Neglect, Youth Violence, Intimate Partner Violence, or Sexual Violence. Of particular interest are projects that use implementation science methods and CBPR/CBPAR.
- (2) Focus on people and populations who are disproportionately affected by injury, violence, and overdose, and consider the underlying social and structural conditions that contribute to inequities in the risk and public health burden of violence, injury, and overdose.
- (3) Include aims that can be achieved within a 2- or 3-year timeline and a budget of ~\$210k per year in total costs (i.e., direct, and indirect costs).
- (4) Be facilitated by an Emory faculty member with a > 0.5 FTE appointment. We are prioritizing early-stage investigators, as defined by the [NIH Early-Stage Investigator Policy](#).

Note that IPRCE is supporting a grant writer to ensure the highest quality application.

Selection process and timeline:

<b>September 12th</b>	Please send (1) 30-line abstract (11-point Arial font) to Stephanie Verna < <a href="mailto:stephanie.verna@emory.edu">stephanie.verna@emory.edu</a> > that describes the problem the project will solve, its relationship to CDC priorities, project aims, and provides a high-level overview of the methods used to solve the problem, and (2) the bio sketch(es) of the proposed PI(s).
<b>Week of September 19th</b>	IPRCE leadership will invite a subset of applicants to present their proposals, and answer questions.
<b>September 26th</b>	Select PIs will be invited to develop the proposals.
<b>Monthly in October-November, or as needed</b>	Check-ins with IPRCE leadership for assistance, advice, and guidance.
<b>December 1st (or earlier)</b>	Draft proposals due to grant writer.
<b>December 15th</b>	Final proposal is due.

Please send questions to Stephanie Verna <[stephanie.verna@emory.edu](mailto:stephanie.verna@emory.edu)>