Grant Title: HEALTH SERVICES RESEARCH ON THE PREVENTION OF TREATMENT OF DRUG AND ALCOHOL ABUSE (R03, R21)

Grant Number: PA-06-308; PA-06-289

Area of Research: Health services research on the prevention and treatment of drug and alcohol abuse.

Release and Expiration: March 31, 2006 release; September 2, 2008 expiration.

Application Deadline: R03, R21-New: February 16, June 16, October 16 annually.

Amount: R03: Up to $50,000 per year in direct costs with a maximum of $100,000 over a two year period; R21: Up to $275,000 for a 2-year period and no more than $200,000 requested in a single year.

Length of Support: R03: Two years. R21: Two years.

Eligible applicants: For-profit and nonprofit institutions, public or private institutions (universities, colleges, hospitals, and laboratories), units of State and local governments, units of State Tribal governments, agencies of the Federal government, units of State and Local Tribal government, domestic and foreign institutions and organizations, and faith-based & community based organizations.

Agency/Department: NIH; NIDA, NIAAA

Summary: This funding opportunity supports health services research on the prevention and treatment of drug and alcohol abuse. Proposed research might emphasize any of the following subjects: (1) Factors that affect the delivery of drug and alcohol abuse intervention and related services, such as social factors, personal behaviors and attributes, financing, organization, management, and health technologies; (2) Dimensions of drug and alcohol abuse intervention and related services, such as accessibility, utilization, quality, effectiveness, and costs; (3) Processes of blending science-based practices into community-based provision of drug and alcohol abuse prevention services; and (4) Research tools to facilitate higher quality health services research on drug and alcohol abuse. Investigators are encouraged to design research that will advance the delivery of drug and/or alcohol abuse care so that science-based prevention and treatment services are adopted in diverse settings, effectively implemented by a range of providers, and produce sustainable effects at reasonable cost for all those who need intervention.