Women’s Heart and Brain Health Chair

Frequently Asked Questions

2018-2019

CIHR IRSC
Canadian Institutes of Health Research
Instituts de recherche en santé du Canada

Heart&Stroke
Cœur+AVC

New Brunswick Health Research Foundation
Fondation de la recherche en santé du Nouveau-Brunswick

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1. **Q. What is the Women's Heart and Brain Health (WHBH) Chair?**

   A. The mandate of each Chair is to generate new knowledge that improves awareness, prevention and understanding of how biology and socio-cultural factors affect women's heart and brain health. The mandate of the Indigenous Chairs in particular will include barriers and external factors that can influence Indigenous women's health in Canada. The specific objectives of this funding opportunity are:

   - To create new knowledge that advances understanding of women's heart and stroke health.
   - To foster innovative, sex- and gender-sensitive approaches to diagnosis, access to high quality care and treatment of heart disease and stroke in women, especially within Indigenous communities.
   - To foster the translation of research knowledge into evidence-based policies and interventions that improves heart and brain health and promotes wellness of women.

2. **Q. Who are the partners?**

   A. Through this initiative, Heart & Stroke is partnered with the Canadian Institutes of Health Research (CIHR) Institute of Aboriginal Peoples Health, Institute of Circulatory and Respiratory Health and Institute of Gender and Health, and the New Brunswick Health Research Foundation (NBHRF).

3. **Q. What are the grants that are available through the WHBH Chair Awards?**

   A. Up to four grants are available, one each to support a single:

   i. Chair in Indigenous Women's Heart and Brain Health – (early career)
   ii. Chair in Indigenous Women's Heart and Brain Health – (mid-career)
   iii. Chair in Women's Heart and Brain Health – (early career)
   iv. Chair in Women's Heart and Brain Health – (mid-career)

4. **Q. What is the difference between an early career investigator and a mid-career investigator?**

   A. At the time of submission (27 April 2018), no more than five (5) years (for early career investigators) or a minimum of five years but not more than fifteen (5-15) years (for mid-career investigators) may have passed since the date of the first full-time faculty appointment at the Assistant or Clinical Assistant Professor level or equivalent. This would include Adjunct positions in a research track for which the applicant first became eligible to write a Heart & Stroke Grant-in-Aid/operating grant (as a Principal Investigator).

5. **Q. As an applicant to the Chair in Indigenous Women's Heart and Brain Health – early career, what if I don't have a full-time academic or institutional teaching appointment in Canada at the time of the award?**

   A. Except in the case of applicants to the early career Chair in Indigenous Women's Heart and Brain Health, Principal Investigators will have a full-time academic or institutional teaching appointment in Canada at the time of the award.
   There will be $75,000/year in salary support for a newly created position for an early career Chair in Indigenous Women's Heart and Brain Health.

6. **Q. What is the WHBH Chair Awards timeline?**

A. 15 January 2018:	Pre-announcement
19 January 2018:	Launch Date
28 February 2018 (16:00 EST):	Expression of Interest/Registration Submission Deadline
27 April 2018 (16:00 EDT):	Full application submission deadline

June 2018:	Announcement of Funding Decisions
01 July 2018:	Funding Start Date

7. Q. How do you apply?

A. There is a two stage approach:

i) Expression of Interest

In order to be considered for the 2018 Women's Heart and Brain Chair Awards, an Expression of Interest, along with the Principal Investigator's Common CV MUST be received by the Heart & Stroke by 16:00 ET on 28 February 2018 via email to research@heartandstroke.ca. Any Expressions of Interest submitted after the deadline will NOT be accepted. There will be no appeal process to late submissions.

ii) Full Application

Applicants successful in the Expression of Interest phase are emailed a full application.

All full applications must be received by no later than 16:00 ET on 27 April 2018 to the following address:

Research Department
Heart & Stroke
110-1525 Carling Avenue
Ottawa, Ontario K1Z 8R9
Attn: Rebekah Harrison

8. Q. How do you receive the application?

A. The applicant will be emailed the full application after Heart & Stroke has received and reviewed the Expression of Interest.

9. Q. Can a WHBH Chair Awards applicant submit more than one Expression of Interest to the overall WHBH Chair competition?

A. No, only ONE (1) funding stream may be selected. The application submitted must be made to the program selected on the Expression of Interest. Applicants may only submit ONE (1) Expression of Interest.

10. Q. How do you find out if your application has been successful?

A. Offers will be made to the highest rated application based on Chair category, until the available pooled resources have been exhausted.
Official letters will be sent to the applicants in June 2018.

11. Q. Who should you contact at the Heart & Stroke Foundation if you have more questions?

A. If you have additional questions about the WHBH Chair Awards, you may email research@heartandstroke.ca.

12. Lay Reviewers and Structured Lay Summaries

a. Q. What is the role of lay reviewers on the Scientific Review Committee?

A. The HSF incorporates lay reviewers on its Scientific Review Committee (SRC) panels in order to increase accountability and transparency of the review process and to ensure that the research is aligned with its goals and mission. The HSF places a high priority on ensuring appropriate lay summaries are submitted as part of each application. If the application is accepted for funding and the lay summary is identified as unsatisfactory, funds will be encumbered pending receipt of a satisfactory lay summary.

The lay reviewer reads the lay summary of each application and provides input on relevance to heart disease and/or stroke. The lay reviewer participates in the SRC meeting and comments on the applications. At this time, the lay reviewer does not vote or provide a rating for the applications. If the application is accepted for funding and lay summary is identified as unsatisfactory, funds will be encumbered pending receipt of a satisfactory lay summary.

It is important that applicants ensure that all information on the application form is clear and concise and that the structured lay summary is completed with a clear explanation of how the research proposal is directly relevant heart disease and/or stroke.

b. Q. What is a lay summary? How do you write one?

A. A lay summary is a clear, plain language explanation of a research project or its outcomes. It provides a bigger picture context for the research and why it is important. A lay summary can be understood by the general public as well as researchers in other fields of study. For more tips on how to write one, please see the article Communicating Your Research in Lay Language.

c. Q. Why is there a grade 10 language requirement for the structured lay summary?

A. The lay summaries are not meant for researchers who readily read and understand scientific literature, they are for the lay reviewers to read and provide input on relevance to the broader community and the mandate of the Foundation. The lay reviewer must therefore be able to have a clear picture of the applicants' proposed research. The lay summaries may also be used for communication purposes and must therefore be understood by the general public.

d. Q. How do you test the grade level of your writing?

A. Microsoft Word © uses the Flesch-Kincaid grade formula and Flesch Reading ease formula to assess writing level. The Flesch-Kincaid grade formula calculates an overall reading grade level while the Flesch reading ease formula calculates a score of reading ease from 0-100, 100 being easier to read. Both Formulae use average sentence length (ASL- number of words divided by the number of sentences) and average syllables per word (ASW- number of syllables divided by the number of words). Please note that Microsoft Word© readability statistics will not display a grade level greater than Grade 12. These formulae also work best with documents over 200 words. Some concepts can be more difficult than others to convey in lay language. The Flesch-Kincaid grade formula should be used to guide, but is not used by the Foundation in determining acceptable lay summaries.

Follow these instructions for displaying readability statistics from Microsoft Word©:

- Click the Microsoft Office Button (upper left corner of screen)
- Select “Word Options”
- Select "Proofing"
- Check off “spelling with grammar”, as well as “readability statistics” options

Notes:

♦ If you have set up Word to check the spelling and grammar of text in other languages, and a document contains text in multiple languages, Word displays readability statistics for text in the last language that was checked. For example, if a document contains three paragraphs — the first in English, the second in French, and the third in English — Word displays readability statistics for the third English paragraph only.
♦ For some European languages within an English document, Word displays only information about counts and averages, not readability.

e. Q. How do you lower the grade level of your writing?

A. Since the Flesch-Kincaid formulae use average sentence length (ASL- number of words divided by the number of sentences) and average syllables per word (ASW- number of syllables divided by the number of words) to calculate grade level, use more small sentences rather than a string of long sentences. Try using smaller words like “tell, show and merge” rather than “identify, illustrate and integrate” and use large technical words only when absolutely necessary. Generalize, simplify your grammar, use analogies, and omit sentences that do not add meaning.

f. Examples of Lay Summaries that follow the HSFC’s required format from HSF’s funded researchers:

Anonymous *The anti-inflammatory role of a low molecular weight heparin lacking anticoagulant activity.*

Dr. Kathryn Todd *Investigations of novel strategies to improve cellular and behavioral outcomes after focal embolic cerebral ischemia*.

Dr. J. Weitz *Improving the effectiveness of thrombolytic therapy*.

13. Q. Where are application deadlines listed on your website?

A. Deadlines for grants/awards are located under Funding Opportunities / Deadlines.

14. Q. What would be considered an incomplete or unacceptable application?

A. Examples of unacceptable or incomplete applications include, but are not limited to:

- Missing sections of the applications (e.g. research proposal, structured lay summaries, signatures, supervisors sections, etc)
- Missing letters (mentor, institutional support)
- Missing network letter of recommendation confirming membership and support for the application
- Missing any CVs (e.g. principle investigator, mentor)
- Submitted on old application form
- Not adhering to the font, margin and page limits
- Un-collated applications
- Faxed / Emailed applications
- Handwritten applications
- Not following instructions for electronic submission

15. Q. What constitutes an “original signature”?

A. HSF will accept a scanned copy of the original signature or electronic signatures for the GIA and NPA programs. For the GIA program, the scanned copy of the original or electronic signature page must be uploaded into CIRCUlink. Applicants need not send an original copy of the signature page to HSF. (Note: The expectation is that an electronic signature will hold the same weight as an original (wet) signature.)

16. Q. What is the HSF’s policy relating to indirect costs of research/overhead?

A. The HSF supports only the direct costs of research. No funding is to be used for indirect costs of research. The definition of indirect costs of research for the purposes of this policy is, costs which cannot be directly associated with a particular research program or operating grant including costs associated with the general operation and maintenance of facilities (from laboratories to libraries); the management of the research process (from grant management to commercialization); and regulation and safety compliance (including human ethics, animal care and environmental assessment).