

# Crafting the NIH Specific Aims Page

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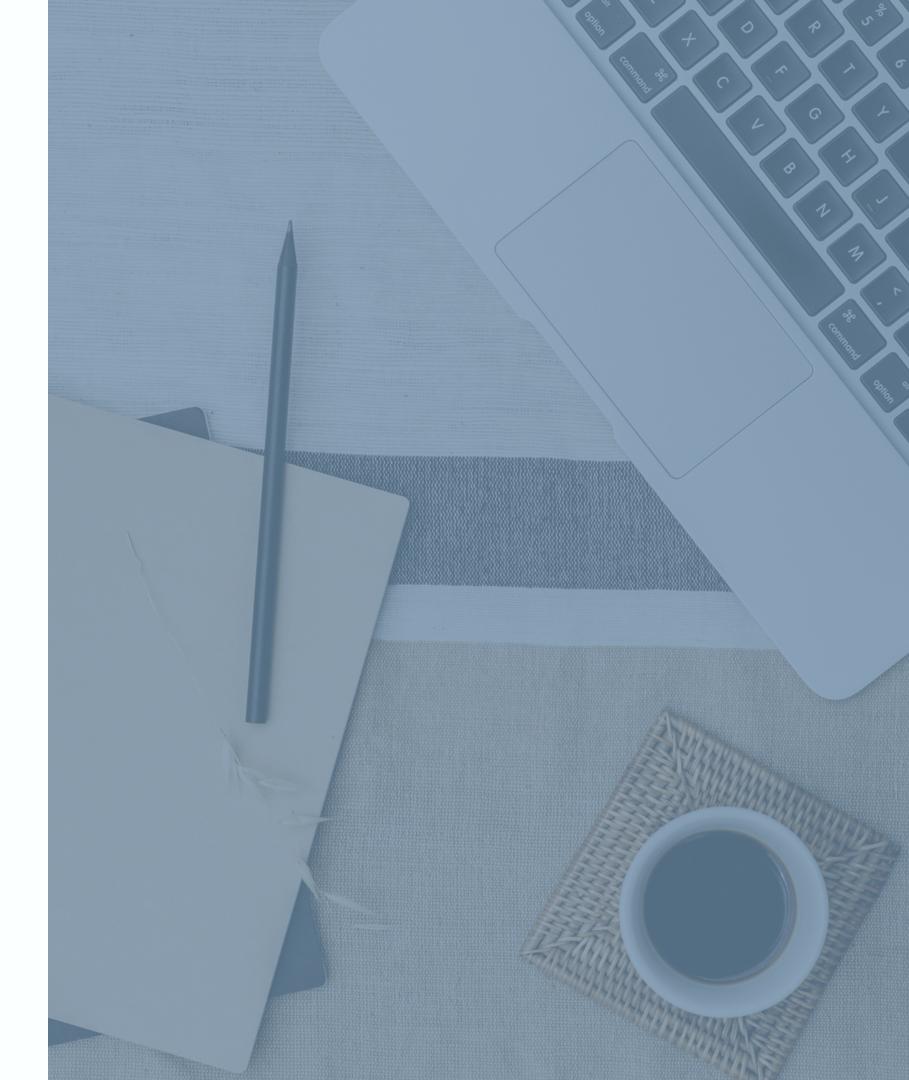
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## What the aims page must do...

Answer three questions:

- What is the problem/knowledge gap?
   (Should it be done?)
- What will you do? (Can it be done?)
- Why you/why now?
- Promise big impact with tractable risk
- Be skimmable in ~90 seconds

If a reviewer only reads one page, it's this one!





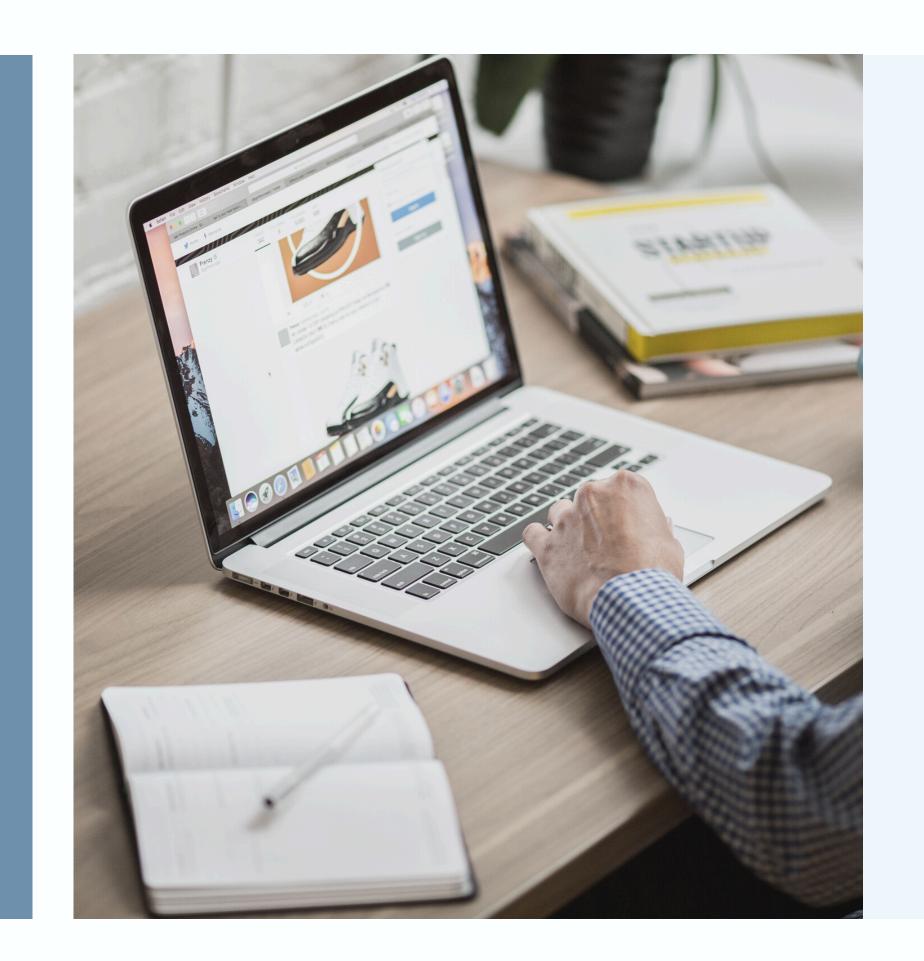
- 1. Hook/Context (2-3 sentences): scale of the issue, who is affected, why it matters now
- 2. **Gap statement**: the specific unmet need and the consequence of not acting
- 3. Long term goal vs. project objective (optional): your long term vision, this specific project
- 4. **Central hypothesis** (or objective for R21/R03): theory, preliminary data (de-risks)
- 5. Rationale: why this will move the field and why you are the right team to do it
- 6. Specific Aims: action verb + method + endpoint + success criteria (1-2 lines each)
- 7. Expected outcomes and impact: concrete deliverables and field/policy/clinical change
- 8. Innovation (optional): what is genuinely new
- 9. One line closer: "completion will enable X and postition us for Y"

### Crafting your aims:

- Use strong verbs: develop, validate, estimate, compare, test, evaluate, implement, optimize, predict
- Avoid weak verbs for R01s: explore, describe, correlate (OK for some R21s/R03s)
- Aims should stand alone avoid interdependence (no dominos!)
- Provide contingencies for high risk elements: back up plans
- Traceability: each aim maps to the central hypothesis/question, all data collection contributes to an aim, analyses match the stated aims

#### Reviewer-friendly design:

- Scannable layout: white space, bold lead ins.
- 2-3 short paragraphs, numbered aims
- Minimal acronyms & jargon
- Figures only if they clarify logic
- Preliminary data: 1-2 sentences (to de-risk), details live in the strategy



#### Significance/Innovation

Burden, gap & potential for meaningful change. What's new, why it matters.

#### Approach

Endpoints, feasibility, and risk management

#### Investigators/Environment

One line to signal the expertise of the team

# Make the review criteria unmissable...

#### New simplified criteria:

- 1. Importance of the Research (sig/innovation)
- 2. Rigor & Feasibility (Approach)
- 3. Expertise & Resources (not scored)

Overall scores is limited by the Importance of the Research Score

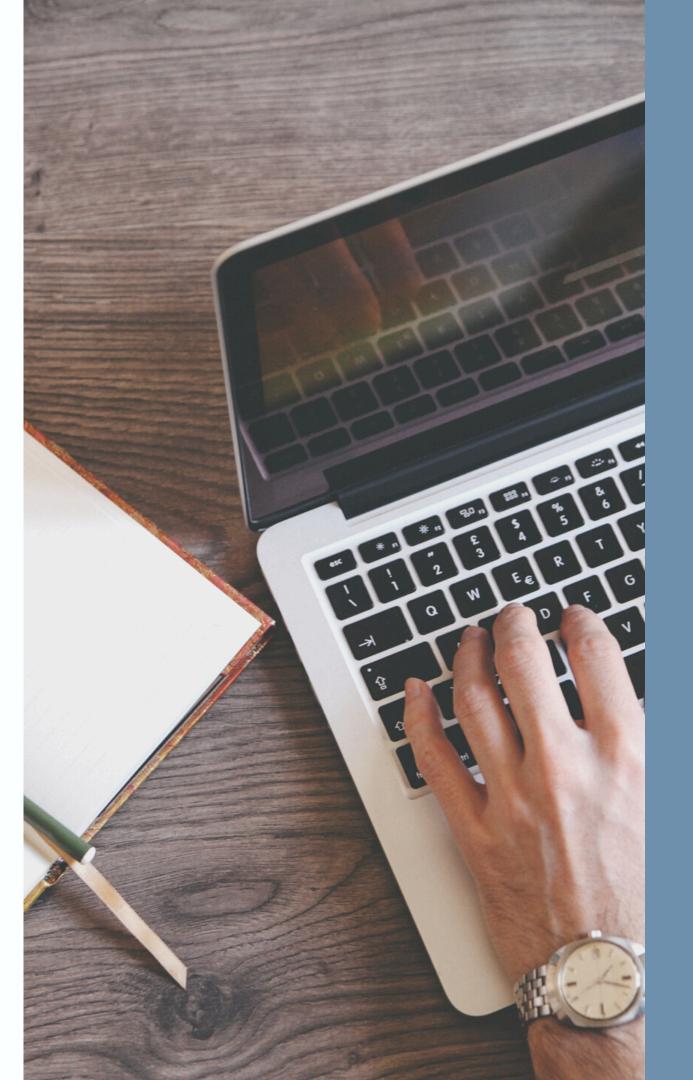
## Tailor by mechanism:

- R01: Hypothesis driven, powered endpoints, clear milestones, lower risk tolerance
- R21/R03: Feasibility, novely, proof-of-concept, less emphasis on hypotheses; sharper, smaller aims.
- K awards: integrate training & research; each aim builds specified competencies

- Aim dependency: If Aim 1 fails, 2 cannot be completed add parallelism/backup analyses
- Overreach: Too many aims 2-3 crisp aims beat four fuzzy aims...
- Vague endpoints: "assess" without metrics name the primary outcome and threshold for success (where appropriate)
- Methods dump: too much jargon in the aim bullets save the details for the approach section
- Innovation inflation: calling routine work "novel" be precise about what is new

#### **COMMON PITFALLS & QUICK FIXES**

#### Aims Page Checklist



- Does the first paragraph make a non-expert care?
- Is the gap explicit?
- Can a reviewer describe the hypothesis/objective in one sentence?
- Do the aims use strong action verbs and name endpoints?
- Are aims non-dependent?
- Is the impact claim concrete and credible?
- Are there cues for rigor/reproducibility and feasibility?
- Would a policymaker/clinician understand the benefit?