





ALLIANCE FOR HEALTH POLICY AND SYSTEMS RESEARCH, UNICEF, AND GAVI

REQUEST FOR LETTERS OF INTENT

DECISION-MAKER LED IMPLEMENTATION RESEARCH TO ADDRESS PRIORITY IMMUNIZATION ISSUES

Deadline: 18 March 2016

The Alliance for Health Policy and Systems Research (AHPSR), UNICEF, and GAVI are soliciting letters of intent for research that seeks to enable the effective implementation of immunization programmes or services within health systems in eligible countries. **Grants of USD 70,000 to 100,000 will be available to support research studies of up to 12 months in duration.**

ELIGIBILITY CRITERIA

Decision-makers of immunization programmes and services are eligible to submit letters of intent in response to this call in collaboration with researchers. The Principal Investigator of the research must be a decision-maker. Decision-makers are those individuals who are directly involved in implementation of an immunization programme or service within the health system in an eligible country (a list of eligible countries is provided below). Programme managers, district health officers, non-governmental providers, public or private practitioners, and front-line health workers are typical examples of such individuals. Additionally, the research team must include as least one researcher affiliated with an academic or research institution based in the study country. Please note that **both these conditions must be met** for the proposals to be eligible for funding.

SELECTION CRITERIA

Letters of intent will be judged on the potential of the research to make a difference in the delivery of an immunization programme or service. Other criteria that will be taken into account include value for money, institutional capacity, as well as ensuring diversity in terms of issues addressed by the research.

DEADLINES

The deadline for the submission of a two-page letter of intent is **18 March 2016**. Invited full proposal submission will be due on **15 May 2016**.

HOW TO APPLY

All submissions must be made online through the AHPSR proposal submission website: <u>http://www.ahpsrproposalsubmission.org</u>.

THIS CALL

In spite of proven solutions and increased support at national and international levels, there exists a staggering burden of avoidable child morbidity and mortality with unacceptability slow progress on improvement of health outcomes. Immunizations are one of the most successful and cost-effective interventions to prevent child illness and save lives; however, achieving effective implementation of immunization programmes and services within health systems is a challenge in many low and middle







income countries. Improved implementation could prevent a significant proportion of the estimated 6.3 million deaths that occur each year in children under five years old, especially in Asia and Sub-Saharan Africa as a means of addressing the inequitable global burden of vaccine-preventable deaths.

The AHPSR in collaboration with UNICEF and GAVI are soliciting letters of intent for research that seeks to enable the effective implementation of immunization programmes or services within health systems in eligible countries. Research funded under this call is expected to focus on the generation of new strategies and knowledge to support this aim. Proposals to develop and test new interventions will not be funded under this call.

Decision-makers of immunization programmes or services in eligible countries are the main target audience for this call. The practical orientation of the field, the kinds of questions asked, and the applied nature of the knowledge generated makes it necessary for decision-makers to have a central role in the conceptualization, design and analysis of the research. While researchers are needed to provide their skills in research methods to support the conduct of robust studies, it is often the person working in the field who asks the most relevant questions related to implementation and can drive the change informed by the research findings.

To ensure that relevant questions are heard and the study undertaken is directed to answer them, this call requires that the Principal Investigator of the research is a decision-maker. Priority immunization issues of specific interest for this call include (but are not limited to):

PRIORITY IMMUNIZATION ISSUES

- Identifying caregivers' barriers to immunization services in urban slum areas. Urban slums are increasingly being highlighted as areas of potential low coverage of immunizations, despite relative geographical proximity to health services. In order to inform the implementation of programmes and services to better deliver immunizations to urban slum communities, knowledge on the barriers preventing caregivers from fully immunizing their children would be useful.
- Adapting and testing strategies or tools to assess the effectiveness of demand-creation communication. Many countries have recently or are planning to conduct studies to understand the demand-side barriers to immunization. The results of these studies are commonly used to inform communications campaigns, which are then deployed using a range of media channels. Unfortunately, the communication interventions, messages, and media products deployed are not often rigorously pre-tested, nor is their relative effectiveness assessed in an objective manner. This topic would encourage research teams to devise or adapt strategies and tools to more rigorously pre-test and assess the effectiveness of demandcreation messages and strategic communication interventions.

Other potential areas:

• Health and immunization systems. Including topics such as: specific barriers to immunization among children and/or their caregivers who are not being reached by immunization services; and the integration between immunization and other services within the health system.







- **Demand and vaccine hesitancy.** Including topics such as: community engagement in demand creation; perceptions about vaccine effectiveness and safety; and strategies to address vaccine hesitancy.
- **Vaccination and coverage.** Including topics such as: Adapting or tailoring vaccination services to increase coverage of unreached and/or specific populations.
- **Programme management, monitoring and evaluation strategies.** Including topics such as: Use of information and communication technologies and their impact on improving the quality of immunization programmess; and vaccination coverage and strategies and tools to improve data quality and strengthen routine data systems.

Grants for research projects of 12 months will be granted up to USD 100,000 depending on the scope and focus of the study, as well as the study setting. Additional funding from other sources should be sought if the budget is anticipated to exceed this amount.

The research supported by this call should aim to:

- Generate knowledge to inform implementation of existing immunization programme or service;
- Strengthen the capacity of decision-makers to generate and use research as a means of addressing implementation barriers encountered in the field.

To support this work, selected teams will be provided with training and ongoing technical support by expert facilitators organized through the AHPSR and UNICEF to further develop and implement their ideas using appropriate research methods.

WHAT IS IMPLEMENTATION RESEARCH?

Despite abundant evidence on the efficacy of affordable, life-saving interventions, challenges are often encountered when implementing these interventions in diverse settings and within the wide range of existing health systems that limits their effectiveness. Research is needed to provide insight on the often bumpy interface between what can be achieved in theory and what actually happens in practice. Implementation research aims to do this, by understanding not only what is and isn't working, but how and why implementation is going right or wrong, and testing approaches to improve it.

Implementation research is a broad field that can address any aspect of implementation, including influencing factors, the process, or outcomes. It includes many types of studies using a wide range of approaches including qualitative, quantitative and mixed methods. Implementation issues often arise as a result of contextual factors that decision-makers may not have considered and the aim of the research is to generate results that may be directly applied within the context. In addition, implementation research involves a variety of stakeholders at each stage of the research process, including decision-makers, implementers and beneficiaries. Implementation research's main focus on finding actionable solutions to real problems faced during implementation within health systems requires special attention to be paid to the context in order to ground research within the routine functioning of the health system and the involvement of stakeholders to ensure that it is locally relevant and feasible.

For more information on implementation research, please refer to: Implementation Research in Health: A Practical Guide <u>http://www.who.int/alliance-hpsr/resources/implementationresearchguide/en/</u>. You







may also visit our website to learn about examples of previously funded projects of implementation research: <u>http://www.who.int/alliance-hpsr/projects/dmir/en/</u>

LETTER OF INTENT SUBMISSION DETAILS

ELIGIBILITY CRITERIA

Decision-makers working with researchers are eligible to submit proposals in response to this call subject to the following criteria:

- The Principal Investigator must be an individual directly involved in implementation of an existing immunization programme or service in an eligible country with a high rate of child mortality and/or low immunization coverage (please see below for list of eligible countries for this research call). Programme managers, district health officers, and front line health workers are typical examples of such individuals.
- Additionally, the research team must include at least one researcher affiliated with an academic or research institution based in the study country.

Please note that **both these conditions must be met** for the proposal to be eligible for funding.

Additionally, the team should include individuals with:

- A variety of technical expertise (e.g. sociology, policy, epidemiology, management sciences) relevant to the proposed study.
- A mix of roles and responsibilities within the country's health system, i.e. policy-makers, programme managers, implementers, front line health workers.

Individuals from high-income countries are not eligible to apply as the Principal Investigator. Collaborations between programmes or services based in countries with high child mortality and individuals and organizations in high-income countries are acceptable on the condition that no more than 25% of the total grant value can go to the individuals or organizations based in the high income country. Applications from UN agencies, including WHO and UNICEF, will not be considered. Similarly, UN country or regional offices will not be entitled to receive any funding from the research grant, though they may be listed as collaborators.







ELIGIBLE COUNTRIES

- Afghanistan
- Central African Republic
- Chad
- Democratic Republic of the Congo
- Ethiopia
- Haiti
- India
- Indonesia
- Kenya
- Madagascar

- Mozambique
- Myanmar
- Niger
- Nigeria
- Pakistan
- Papua New Guinea
- Somalia
- South Sudan
- Uganda
- Yemen

HOW TO APPLY

All submissions must be made online through the AHPSR's proposal submission website at <u>http://www.ahpsrproposalsubmission.org</u>. Hard copies and emails of submissions will **NOT** be accepted. Submissions may be written in English or French.

Please note:

- Save frequently to prevent losing your work;
- Once your application has been submitted, it can no longer be revised;
- All tables, figures, and images should be included as annexes/attachments at the end of the application.

Applicants must submit an initial two-page letter of intent by **18 March 2016**. This is a firm deadline. **Letters of intent received after the deadline will not be accepted or considered.**

The letter of intent should:

- Clearly state the health problem and describe the existing immunization programme or service, including the barrier to successful implementation;
- Explain why overcoming this barrier is necessary to enable effective implementation of the immunization programme or service and the knowledge that is needed to address it;
- Clearly spell out the proposed research, including a brief description of proposed methods;
- Describe what the proposed research would achieve and how this achievement would be measured;
- Provide details of the research team including position and qualifications of the Principal Investigator and researcher(s);
- Provide an estimate of the total funding requested for the project.

Letters of intent will be judged on the potential of the research to make a difference in the delivery of an immunization programme or service within the health system. Other criteria that will be taken into account include value for money, institutional capacity, diversity of issues addressed by the research, and regional representativeness.







Successful applicants will be notified by 15 April 2016. Projects that are selected will be invited to develop their letters of intent into full proposals. Full proposals of up to 5,000 words are due by 15 May 2016. Research teams should submit proposals based on an understanding that accepted proposals will undergo refinement at a Protocol Development Workshop (see below).

All proposals will be assessed by an external committee of independent experts using the following criteria:

- Relevance of the proposed research to the present call. Research objectives and questions should relate to implementation. Knowledge generated through the proposed research may be used to enable effective implementation of an existing immunization programme or service.
- Feasibility of approaches proposed. This includes: a) feasibility of methods proposed to address the research question within the intended time frame, and b) feasibility of research to produce results that can be acted upon by the intended audiences.
- Justification of study design and methods to address the primary research question.
- Capacity of research team to implement the proposed study.
- Appropriateness of budget and timing for proposed research activities and precision and clarity in budget proposal and justification.

Based on these criteria, proposals will be selected for funding. Funding decisions will be communicated to applicants by 15 June 2016.

Selected teams will be invited to a Protocol Development Workshop in mid-August 2016 where expert facilitators will provide technical support in further refining the projects and translating the proposals into protocols. Based on feedback obtained at the workshop, research teams will be expected to develop their protocols further and have a final version ready by the first week of September 2016. Ongoing technical support will be provided as needed and revisions to the protocol may be necessary.

FOCAL POINTS

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<u>TIMELINE</u>

Activity	Date
Research Call Launched	17 February 2016
Deadline for Letter of Intent Submission	18 March 2016
Invitation for Full Proposal Submission	15 April 2016
Deadline for Full Proposal Submission	15 May 2016
Notification of Funding Decision	15 June 2016
Protocol Development Workshop	TBD August 2016
Final Protocols Submitted	1 September 2016
Begin Project Implementation	1 January 2017