



Alliance for Health Policy and Systems Research, World Health Organization

Call for Proposals

Supporting National Processes for Evidence-Informed Policy in the Health Sector of Developing Countries

7 July 2008

Deadline for submission of proposals: September 12th 2008

Supporting National Processes for Evidence-Informed Policy in the Health Sector of Developing Countries

1. Background

The Alliance for Health Policy and Systems Research aims to promote the generation and use of health policy and systems research as a means to improve the health systems of developing countries. One of the specific strategies of the Alliance focuses on sponsoring national processes to support evidence-informed policy making. For more information related to the Alliance objectives and thematic areas, please refer to our website: www.who.int/alliance-hpsr.

The Alliance is launching this Call for Proposals so that it can provide support to national processes for evidence-informed policy making. The Alliance has allocated up to 500,000 USD for this Call and intends to award several grants to institutions in different regions for a period of up to three years. The Alliance may consider extending grants beyond this period but only for those institutions that show good performance. The Alliance plans to award 3-4 grants, however the final number and size of the grants will depend on the quality and cost of the applications received.

As the work focuses upon evidence to policy linkages at the national level, the Alliance HPSR particularly encourages applications from national (or sub-national) institutions in developing countries. In recent years the Alliance has collaborated closely with the Evidence-Informed Policy Networks (EVIPNet) (see www.evipnet.org) and EVIPNet teams are particularly encouraged to apply for grants under this Call for proposals, however the Call is open to any team based in a low and middle income country that wishes to apply. Organizations based in high-income countries are not eligible to apply as a lead applicant for these grants.

2. Goal and Objectives of the Call

Through this Call, the Alliance intends to support national processes for evidence-informed policymaking and to strengthen evidence-to-policy links. Research evidence is just one amongst several influences upon policymaking and the Alliance intends to facilitate the use of research evidence in the policy making process at the country level.

The objectives of the Call are to

- Positively influence the development of policies at the country level through the application of health policy and systems research evidence;
- Contribute to evidence informed policy making through (i) promoting exchange between researchers, advocacy groups, and policy maker communities in HPSR and/or (ii) establishing mechanisms that encourage policy makers to seek and apply evidence and/or (iii) encouraging researchers and other civil society representatives to package and promote the use of evidence in a policy-friendly manner.

Additionally, the Alliance intends to use this experience to add to the knowledge base about what strategies appear most promising to promote evidence-informed policy and how and why such strategies may be effective. Grantees will be required to participate in a prospective evaluation of

the interventions supported by the Alliance with the aim of learning which strategies work and which do not. A protocol, methodologies and tools for this evaluation have already been developed. These evaluation tools place relatively limited additional burden upon the implementing teams and **the Alliance will separately negotiate this part of the agreement with successful applicants.**

The grant program is **not** intended to:-

- Address promotion of the use of evidence in clinical decision-making. Applications should focus primarily on the use of health policy and systems research, defined broadly as the production of new knowledge to improve how societies organize themselves to achieve health goals¹.
- Support the dissemination of findings of a particular research project.

3. Possible Activities to be conducted under the Call

Activities conducted under this grant could target a range of evidence-to-policy interactions. Grants could focus on national or possibly on sub-national (e.g. state) policy makers.

Interventions for evidence-informed policymaking are diverse. Lavis et al. (2006)² propose four broad categories, which can be used either singly or in combination (See Figure 1). As part of the proposal development process, we encourage the country teams to discuss and evaluate relative advantages and disadvantages of the different interventions described below (amongst others) and to reflect in the proposal only the ones most suitable for their context and considered for implementation:

- a) Enhancing push factors (Model A)** - “Push” efforts, which are led by researchers, intermediary groups and other purveyors of research (such as communications staff) aim to increase awareness of research evidence among policy makers and civil society. Such efforts are well suited to situations where the potential research users are unaware they should be considering a particular message or in some cases would prefer to continue to disregard evidence (Lavis et al 2006). To operationalize a “push” model, country teams may want to consider communication and advocacy efforts if they already possess actionable messages arising from research.

Possible interventions may include (but are not limited to):

- Development of synthesis reports, policy briefs and other printed products targeted at research user audiences
- Communication and advocacy efforts of groups who already possess actionable messages
- Support to press conferences and other mass media events.

- b) Enhancing pull factors (Model B)** – User-pull and/or demand for research evidence are critical for research evidence uptake, it occurs when policy and decision makers identify an information gap and request evidence or commission research to fill this gap (Lavis et al 2006, Nutley 2003, Invaer 2002).

Possible interventions include:

¹ For the definition of Health Policy and Systems research used by the Alliance please visit the website http://www.who.int/alliance-hpsr/resources/AllBriefNote1_5.pdf

² Lavis J.N., Lomas J, Hamid M, Sewankambo N.K, 2006. Assessing country-level efforts to link research to action. Bull World Health Organ vol.84 no.8

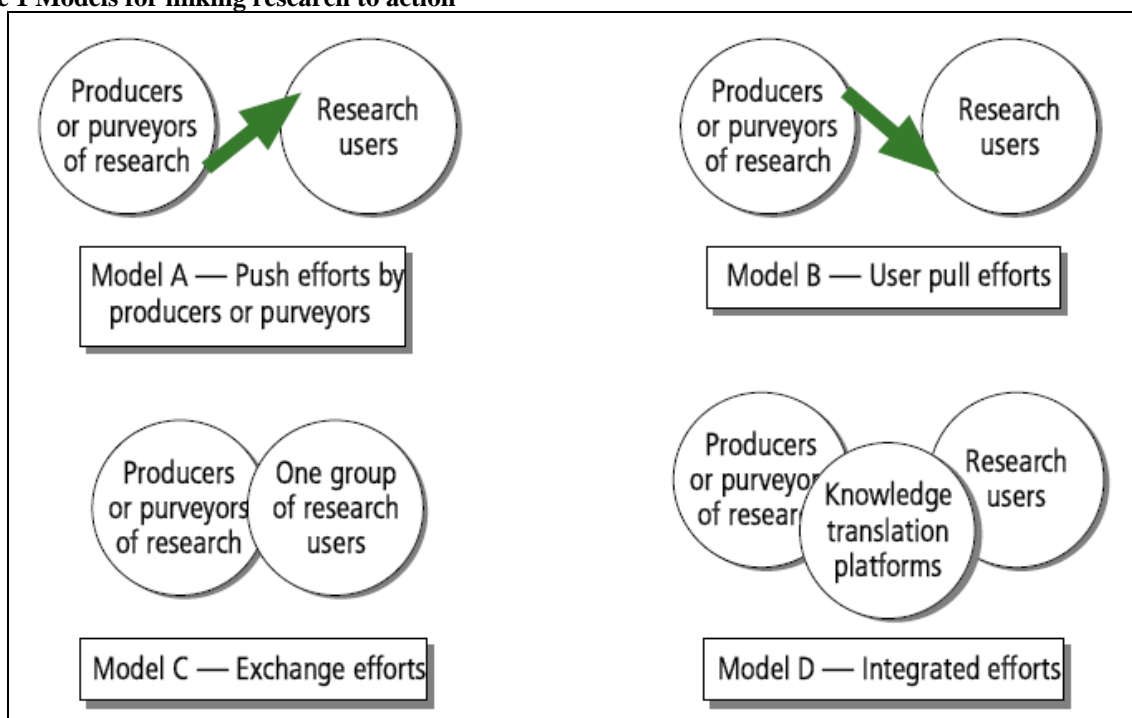
- Providing funds to policy makers for commissioning research or research syntheses around priority policy issues;
 - Establishment of rapid response mechanisms or policy advisory units within Ministries of Health and/or other policy-making bodies or strengthening existing capacity with additional training.
 - Technical support and or training to help policy makers to facilitate commissioning of appropriate research or syntheses
 - Training policy makers in identifying and applying evidence to decision making
 - Supporting initiatives that provide open access to government information, thus leading to more informed citizens and pressure groups.
- c) **Supporting exchange efforts (Model C)** – Exchange efforts occur when producers and users of research work in partnerships and establish links.
- Possible interventions include:**
- Supporting forums, meetings, workshops, or conferences to facilitate exchange between researchers and research users
 - encouraging the establishment of mechanisms which allow for ongoing exchange between researchers and research users, such as research priority setting committees
 - supporting secondment of trusted researchers, who already have established links with policy makers into policy making units.
- d) **Supporting implementation of an integrated model (Model D)** - integrated models combine elements of the three models described above.

The list of proposed interventions is only indicative and applicants are strongly encouraged to propose a package of interventions that they feel are most appropriate to their context.

For selecting appropriate interventions the Alliance encourages applicants to consult the diverse literature available on the internet including:-

- The Alliance for Health Policy and Systems Research (2007) Sound Choices: Enhancing Capacity for Evidence-Informed Health Policy (particularly chapter 7) available from <http://www.who.int/alliance-hpsr/resources/en/>
- Evidence Informed Policy Networks www.evipnet.org
- The Canadian Health Services Research Foundation: http://www.chsrf.ca/home_e.php
- Research and Policy in Development (RAPID), Overseas Development Institute, UK: <http://www.odi.org.uk/RAPID/>
- The Collaborative Training Programme (CTP) Resource Modules: <http://www.who.int/alliance-hpsr/resources>

Figure 1 Models for linking research to action



Lavis et al 2006

4. Technical support

The Alliance HPSR is an "engaged funder" and is particularly concerned about ensuring the technical quality of work conducted through its grants programmes. The Alliance therefore will work closely with grantees to support their work, promote opportunities for South-to-South learning through workshops and online fora, and if appropriate, and in consultation with the grantees, identify technical support to assist grantees in their efforts.

The Alliance intends to help the grantees prospectively evaluate the effectiveness of the interventions supported, and will provide a methodology, tools and theoretical framework for this work. Grantees may also be given training or technical support on the evaluation module if necessary. **As noted above, participation in evaluation of the intervention will be a requirement of the award of this grant. Additional budget necessary for implementation of the evaluation will be negotiated separately.**

5. Eligibility to apply for the Call

All teams bidding for this grant must be based in a low or middle-income country, although up to 20% of the grant can be used to support the involvement of participants from high-income countries and/or from regional organizations.

As these grants aim to enhance the use of evidence in policymaking, policy makers, should form part of the proposing team. Teams composed of different organizations and actors (such as policy-makers, research institutions, think tanks, civil society representatives and knowledge brokers) are welcome to apply and will be given preference during evaluation.

Teams submitting proposals should demonstrate:

- Engagement and commitment of policy makers and/or civil society representatives to the proposal
- Proven expertise in health policy and systems research and in particular capacity to obtain, package and communicate the research evidence.
- Familiarity with possible strategies to promote research use in policymaking.
- A letter of support to the initiative or the proposal from the appropriate government authority.

6. Proposal Evaluation Process and Criteria

The proposals will be evaluated according to the following criteria:

• Overall understanding of the nature of the call and overall environment in the country with respect to enhancing the use of evidence in policy-making	20%
• Soundness and likely impact of interventions identified	20%
• Feasibility of implementation in the timeline proposed	20%
• Technical capacity of the proposed team	20%
• Commitment of policy makers to the project	10%
• Appropriateness of budget for the proposed interventions	10%
Total	100%

In awarding grants the Alliance will seek to achieve a relatively even geographic distribution of grants and will ensure that a proportion of the grants are allocated to teams from low income countries.

7. Selection Process

Please direct all questions concerning this call for proposals, by email, to the Alliance for Health Policy and Systems Research (alliancehpsr@who.int). All such questions should be submitted by Wednesday 13th August 2008. The Alliance will post responses to these questions on its website for all potential bidders to read. Responses will be posted as questions are received, but all responses will be posted by Friday 15 August, 2008.

All applications must be submitted to the Alliance for Health Policy and Systems Research, by email (alliancehpsr@who.int), and must be received by **12 September 2008**. All applicants should use the proposal format provided in Annex 1. In the header of the email please put "**Proposal: Supporting National Processes for Evidence-Informed Policy Making**". The Alliance will notify all applicants of receipt of their application.

Applications will be independently reviewed by two technical experts using the criteria described above.

A small committee composed of members of the Alliance's Scientific and Technical Advisory Committee and other technical experts will make the final selection of grant recipients, based

largely upon the scores awarded to the proposals, but also taking into account geographic distribution, country income status and the overall budget available to support the work.

Successful (and unsuccessful) applicants will be notified towards the end of October 2008. Work on implementation of the grants will be expected to start during January 2009.

Annex 1 - Proposal template

Alliance for Health Policy and Systems Research

Supporting National Processes for Evidence-informed Policy in the Health Sector of Developing Countries

THIS FORM SHOULD BE SUBMITTED BY E-MAIL TO: alliancehpsr@who.int

PART I. ADMINISTRATIVE INFORMATION

Selected information from this box (1.1-1.3) may be released to the general public if this proposal is selected for funding		
1.1 Name of Team leader and institutional affiliation:		
Title:!!!!	Surname:!!!!	First name: !!!!!
Name of Department and Institution (30 words maximum) !!!!!		
Full postal address of team leader to be used for correspondence (170 words maximum): !!!!!		
Telephone: !!!!!	Fax: !!!!!	
E-mail:!!!!	E-mail 2: !!!!!	
1.2 Title of project: (30 words maximum) ID Number: !!! [LEAVE BLANK] !!!!		
1.3 Summary: (300 words maximum) (please note that summaries will be used to publicize the work of successful applicants)!!!!		
1.4 Has your institution ever received a grant from a funding body before? !!! If yes, please provide the grant making institution, project title, dates and value of the grant, for the last three grants awarded. a. !!!!! b. !!!!! c. !!!!!		

PART II - PROPOSAL

Proposals should be **no more than 20 pages** in length, plus annexes.

1. Technical proposal

(approximately 10 pages)

1.1 Evidence to policy interaction

Briefly describe the policy environment in the country where the project will be implemented, and identify any particular policy issues that health policy and systems research may be well placed to inform. Describe the nature of policy making in the country, how research evidence is currently incorporated in the policy process, and in your view where the gaps or problems lie. If possible reference specific reports or studies that form the basis of your assessment. What prior work has been done to address these issues?

Finally, why is it important for the Alliance to support your project? What difference will the Alliance funding make?

1.2 Objectives

Describe the objectives of the proposed program of work.

1.3 Activities and Strategies

Describe the program of work and strategies/activities that will be conducted in order to strengthen evidence-to-policy links: what will be done and how, who will be involved, which policy issues will be considered, would the work be on a national or sub-national level and who will be the key policy makers and researchers involved in the project?

When selecting the interventions please try to base their selection upon either research/consultative work that was carried out in-country and/or the available literature.

1.4 Outcomes

Briefly summarize the outcomes (and outputs/products) if this program of work was successfully accomplished.

2. Technical Capabilities

(Approximately 5 pages)

Provide a brief description of the capacity of the organization/team submitting the proposal, particularly as it pertains to health policy and systems research and evidence to policy interaction. Describe the status and nature of the applicant organization.

If the application is a joint one between more than one organization then please briefly describe the organizational capabilities of all organizations involved and what role each organization will play.

Identify key staff that will lead the project and explain what role each of the core team members will play. In the Annex, provide a one-page summary CV for all staff included in the proposal.

Describe the past health policy and systems research work carried out by the implementing partners and how this proposed project will build upon the past work.

3. Budget

(Approximately 2 pages)

Please use the format below to present your Budget in USD. Make sure that you provide sufficient explanation of the budget table to justify your request.

If there are possibilities of leveraging additional resources, (e.g. through existing grants) then please describe these.

	Name (if known)	Position	% time devoted to project	Amount USD
1. Personnel	a. b. c. d.			
Total Personnel				
	Please enter details of items to be purchased and unit cost in this column			
2. Services & Supplies				
Total Services & supplies				
3. Equipment				
Total equipment				
4. Local Travel				
Total local travel				
5. International travel				
Total international travel				
6. Other expenditures				
Total other expenditures				
GRAND TOTAL				

Notes on budget

1. For personnel, indicate for each individual staff person proposed the percentage of time they would devote to the project. The budget requested should reflect salary multiplied by the amount of time spent on the project. Justify personnel salaries in relation to institutional remuneration policies.
2. For services and supplies, include telephone, fax, internet hook up, photocopying, office supplies etc. Itemize budget for each individual service or type of supplies.
3. For equipment, indicate needs for computers, printers etc.
4. For local travel, enter details for local air tickets, hotel costs, per diem within the country.
5. For international travel, enter details of international air tickets, hotel costs, per diems for international travel.
6. For other expenditures, include space rental, clerical and other administrative costs. Note that the Alliance HPSR will support institutional overheads up to 15%.