A Strategy for Research Capacity Strengthening in developing countries

Long-term Institutional Development grants
1 Background

The UNDP/UNFPA/WHO/World Bank Special Programme of Research, Development and Research Training in Human Reproduction (HRP), which is a part of WHO’s Department of Reproductive Health and Research (RHR), has an ongoing commitment to strengthen capacity for reproductive health research in developing countries. This strategy is based on the recognition that research plays a crucial role in: the identification of reproductive health needs within communities; the generation of new knowledge for advocacy; the selection and testing of priority prevention and care interventions; the resolution of reproductive health problems; the improvement of policy formulation through evidence-based recommendations; the strengthening of service programmes by applying research-generated technologies and up-to-date practice guidelines; and decisions about the appropriate allocation of health resources with the overall aim of promoting the well-being of communities. Underlying HRP’s effort in research capacity strengthening is the conviction that improvements in research capacity will contribute to improvements in the health status of the population through the utilization and application of evidence-based recommendations.

One of the mechanisms for research capacity building is the award of a Long-term Institutional Development (LID) grant. A LID grant is a technical support package covering the development of human resources essential for conducting research in reproductive health, and the development, strengthening and supply of movable non-human research resources and infrastructures. The award of such a grant is subject to review and approval by the relevant Regional Advisory Panel (RAP)\(^1\) and HRP.

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\(^1\) A RAP consists of researchers, programme managers, public health specialists and other experts drawn from the region. It serves as the regional scientific and technical advisory body to RHR on national/regional research, capacity building and programmatic activities in reproductive health. There are currently four RAPs: one each for the Americas region; Africa and Eastern Mediterranean region; Asia and Pacific region; and European region. RAPs meet annually.
2 Goal

To improve reproductive health in countries and regions through support to priority national/regional research, in particular that linked to improved operations of reproductive health programmes.

3- Objectives

The LID programme is designed to provide support in line with two major objectives of HRP which are: to collaborate with countries in enhancing national capacity to conduct reproductive health research and to promote use of research results in policy-making and planning in order to improve reproductive health care delivery.

Specifically, it aims to:

3.1 Provide support to selected centres in order to develop or strengthen national capacity to conduct reproductive health research.

3.2 Assist countries, through the supported centres, in their efforts to identify priority issues, needs and necessary interventions in reproductive health.

3.3 Strengthen centres in the development and availability of human and material resources necessary to undertake research in priority areas of reproductive health.
3.4 Assist countries with the implementation of appropriate strategies for the dissemination of scientific and policy-relevant research findings to relevant target groups including policy-makers, stakeholders and the scientific community.

3.5 Promote the utilization and application of research-derived evidence, in collaboration with policy-makers and stakeholders, to improve reproductive health policies, programmes and outcomes within national contexts.

4 Key elements of LID grant

4.1 A LID grant provides funding to developing country centres to strengthen their research output through financial support towards: the implementation of well-defined research projects; research training locally, within or outside the region; organization of short group-learning activities; purchase of laboratory equipment and consumables; purchase of computer equipment and software, including establishment of information technology facilities; data processing and library resources; transport facilities.

4.2 A LID grant is normally awarded for up to a maximum of five years, renewable once for another five years, subject to satisfactory annual performance by the recipient centre.

4.3 The centre’s institutional leadership and national authorities should be committed to the improvement of the centre and to the promotion of reproductive health, and should be willing to gradually increase financial support to the centre for its sustainability.
4.4 The formulation of a LID grant proposal should include research projects which are within the broader international reproductive health agenda, such as that outlined in the ICPD 1994 Programme of Action and/or related subsequent international meetings.

4.5 The different elements of the grant proposal should be consistent with the overall goal of enhancing the capacity of the centre to be able to meet local or national reproductive health research and research training needs and should reflect the potential of the centre to address these needs.

4.6 The grant proposal should spell out clear short (1 year), medium (2-3 years), and long-term (5+ year) objectives with measurable, expected outcome(s), and indicators and milestones or possible achievements.

4.7 The grant proposal should outline the mechanisms for ensuring continuity in the implementation of research projects and the provision of annual reports to HRP in the case of changes in local leadership.

4.8 The proposed research programme, linked to the grant proposal, should be relevant to national needs (and preferably based on a formal national reproductive health needs assessment with input from national authorities) and should promote research-based training.

4.9 Centres are encouraged to forge strategic partnerships or participate in relevant research networks during and following the implementation of a LID award. The grant proposal should outline proposed links with other units/institutes that could strengthen the centre through multidisciplinary input(s).
4.10 The grant proposal should contain plans for the dissemination of research findings to the public, the scientific community and policymakers, with a view to promoting greater utilization of research recommendations.

4.11 Support can be provided within a LID grant for research-linked short courses, workshops, symposia and seminars.

4.12 LID grant recipient centres are encouraged to use the support of HRP to leverage for additional funding through other channels such as national and external donor sources. Demonstration of ability to secure such additional support reflects positively on the centre and its potential for being able to sustain its achieved level of development.

5 Eligibility criteria

5.1 The centre should be a research unit focused on reproductive health and be part of a university, government structure or a non-governmental organization (NGO).

5.2 The centre should demonstrate the potential for becoming a viable research entity, which is responsive to national reproductive health needs.

5.3 LID grant applications should have the support of national and immediate authorities.

5.4 Applications should preferably be from centres in Least Developed Countries (LDC).
5.5 The centre should provide evidence that it has the necessary financial support structures and essential administrative leadership to implement the grant proposal.

5.6 The centre should have the potential to apply the research findings in reproductive health care and prevention by having established or by establishing firm links with appropriate policy-makers and stakeholders as well as reproductive health programmes and services.

5.7 Recipients of two consecutive cycles of LID grants are not eligible.

5.8 Prospective centres should have, or be willing to establish, acceptable scientific and ethical review mechanisms for research.

6 Monitoring performance of centres

6.1 LID recipient centres will be expected to provide, in a timely manner, comprehensive annual technical and financial reports to HRP, using the specific reporting forms provided for this purpose.

6.2 Recipient centres should be aware that they are accountable for accuracy and quality of their technical and financial reports to HRP. At the discretion of HRP, an external audit can be requested on the management of the LID grant funds provided to the centre.

6.3 The performance of the centre shall be reviewed annually by the respective Regional Desk in HRP Secretariat and by the relevant RAP. (Please refer to Annex 1 for a representative list of indicators of performance, which are designed to act as a guide for the
appraisal of centres by HRP). In addition, a site-visit to review the centre’s performance will be undertaken at the end of the first two years and at the beginning of the fifth year of funding.

6.4 A systematic in-depth review of the overall research capacity strengthening support provided by HRP will be conducted periodically and may entail site-visits, review of annual reports and requests to centres for provision of necessary assessment data.

6.5 The HRP Secretariat and/or RAP may deem it necessary to request a comprehensive review of the centre’s performance by an independent consultant(s) and/or by HRP Secretariat at any time during the course of implementation of a LID grant.

6.6 Annual reports by the centre, review reports by independent consultant(s) and assessments by the Secretariat and RAP will be used to determine the extent to which the centre has been able to deliver on the objectives of the grant, and on whether it qualifies for receiving further grant support from HRP.

6.7 On the advice of the respective RAP and the HRP Secretariat Regional Desk, HRP may terminate or discontinue the LID grant. The grounds for such termination may include, among others: poor performance by the centre; failure to provide comprehensive annual technical and financial reports in a timely manner; dysfunctional financial system at the centre; mismanagement or inappropriate use of grant funds; failure by the centre to achieve the objectives spelt out in the approved grant application; and lack of funds in HRP to continue supporting the centre.
7 Application process and grant award

7.1 HRP provides application forms for a LID grant; these forms need to be completed either to initiate support or to renew such support annually.

7.2 The centre should demonstrate its potential for conducting the activities being proposed in the application through, among others, the completion of an Institutional Profile form provided by HRP.

7.3 The completed HRP LID grant application forms should be centred around research project(s) that would be conducted during the course of the grant implementation. The research project proposal(s) could be a fully developed protocol, using HRP guideline forms, or a concept proposal outlining the research planned; the latter should be followed by a fully developed proposal.

7.4 The award of a LID grant is subject to a comprehensive review, by the respective RAP and HRP Secretariat, of all the activities proposed in the application.

7.5 The proposed research project(s) should be approved by the local ethical committee, the respective RAP, and by the relevant peer review committees of HRP.

7.6 The proposal should outline mechanisms for ensuring continuity in annual reporting and conduct of proposed project activities.

7.7 Annual support to a centre through a LID grant would not normally exceed US$ 100,000.
7.8 Separate application forms and guidelines for research training grants (RTGs) are available for staff members of the centre who are being proposed by the centre for research training or secondment nationally, at a regional centre or outside the region, as part of LID grant support. Trainees are eligible for a Re-entry Grant to support a research project on returning to the home institution.

7.9 Applicants are advised to seek technical advice from HRP before they submit an application.

7.10 In each case HRP Secretariat will consult with the relevant WHO Representative (and/or the respective WHO Regional Office) and national authorities to identify centres which merit support according to the conditions outlined in this brochure. Alternatively, prospective centres can approach HRP to request consideration.
Annex 1

INDICATORS OF PERFORMANCE

WHO may use the following in the assessment of performance of centres:

1. *Indicators for administrative efficiency*

   - Implementation rates:
     - Fund disbursed/total funds allotted (%)
     - Number of projects initiated/total number of projects planned (%)
     - Number of projects completed/number of projects expected to finish (%)
     - Number of research training grants (RTGs) implemented/total number planned (%)
     - Number of returnees/total number expected to return (%)

2. *Indicators for effectiveness in national/regional research*

   - Research output:
     - Number of national and/or regional research projects initiated
     - Number of national and/or regional projects by area within reproductive health (fertility regulation, maternal
health, etc) and by type of study (biomedical, epidemiological, social science, etc)
Number of national projects completed
Number and type of publications arising from national research projects

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  Staff development:
  Number of staff trained
  Number in different fields of training
  Number trained within and outside of region
  Sex ratio of staff trained

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  Responsiveness to changing reproductive health research needs and priorities:
  Trends in the number of projects in different areas and types of research

3. **Indicators for effectiveness in global research participation**

(Global research refers to that initiated by any of HRP’s Thematic Groups or by other international agencies.)

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  Research output:
  Number of global research projects that centre is involved in
  Number of global projects completed
  Number and type of publications arising from participation in global research projects
4. **Indicators of sustainability**

- Trend of funding profile from WHO, national, and international sources:
  - Trends in the number of projects funded by WHO, national and international sources
  - Amounts of funding from WHO, national and international sources

5. **Indicators for impact**

- Impact of research on national policy formulation (number/type of activities concerned with dissemination of information, advocacy and information, education and communication (IEC), attendance of policy-makers, programme managers and service provides to dissemination fora)
- Impact on health services (adoption and utilization of research findings)
- Adoption of evidence-based practices or change in behaviour at relevant levels
- Number of staff involved in national, regional, and international advisory bodies/technical committees
- Number of people trained within the institution
- Networking role within the region