



Health Systems Research Initiative

Providing Evidence to Strengthen Health Systems in Low- and Middle-Income Countries (LMICs)

- **Status:** Open
- **Open date:** 14/11/2016
- **Closing date:** 24/01/2017 16:00
- **Type:** Calls
- **Categories:** Global health, Methodology

Summary

The Department of International Development (DFID), the Economic and Social Research Council (ESRC), the Medical Research Council (MRC) and the Wellcome Trust (WT) jointly fund the Health Systems Research Initiative. All funders are committed to funding world-class research with high potential for impact on policy and practice.

Launched in 2013 this programme will generate world class and cutting-edge research that addresses key questions on strengthening and improving health systems in developing countries. Following an excellent response to this programme from the research community, funding has now been secured for an annual call under this initiative until 2021.

The programme's aims are to fund methodologically rigorous, high quality research that will:

1. Generate evidence on how to strengthen and improve health systems for people living in low- and middle-income countries.
2. Use a health systems approach to inform the delivery of evidence-based interventions or structural changes. Proposals must demonstrate how interventions relate to and affect wider elements of a health system such as governance, financing, health workforce, information systems, service delivery etc.
3. Provide evidence that is of direct relevance to decision makers and practitioners in the field.

This is the fourth annual call for the Health Systems Research Initiative. Up to £6million is available for funding proposals under this call. Innovative proposals are sought from across the public health, social and biomedical sciences and must clearly identify what health system challenge is being addressed. Proposals must situate this clearly-defined challenge within an understanding of the broader health system linkages and describe how and why findings from the project have the potential to improve the health of people living in low and middle-income countries. Funding is available for research only; we will not fund the routine delivery of health services.

Projects with Principal Investigators (P-Is) from LMICs are strongly encouraged and all proposals must include Co-Investigators from the LMIC in which the research is taking place. Principal investigators can be based in the UK or any LMIC.

Please note that there is specific guidance for both the Research Grants and Foundation Grants. Please consult these documents to successfully develop your grant proposal and submit to the appropriate call

Research Grants: (Applications for Research Grants will be subject to a 2 stage review process. Only those successful at the outline stage will be invited to submit a full application and final funding decisions will be made in October 2017). The duration of a Research Grant is usually up to 3 years, with a maximum duration of 5 years. Small and larger-scale projects are invited. As a guide, applicants should note there is approx. £4m available for Research Grants under this call. Funders would like to fund 5-10 projects.

Foundation Grants: (Applications for Foundation Grants will be reviewed at the March 2017 panel meeting following which funding decisions will be announced). We anticipate the duration of foundation grants to be no longer than 24 months, with a maximum budget of £200k each. The purpose of a foundation grant is either:-

- (i) to conduct preliminary studies needed before a full research grant proposal can be designed, this can include work to evaluate existing interventions or pilot and feasibility work to inform plans for future research.
- (ii) to explore possible health system innovations, under researched areas or creative approaches that have the potential to be developed further, however such proposals should also have practical applications and should not be purely conceptual.

Recipients of Foundation Grants will not automatically progress to full-scale research projects after their grant has ended. They will be expected to apply for a full-scale research project through the standard competitive process.

Example Questions

We have provided below a list of example questions intended for guidance and to assist applicants' understanding of the scope and scale of research that funders expect to see in this call. This is not an exhaustive list and therefore should not be treated as a set of indicative questions.

Research Grants

- How can health systems better meet the needs of specific groups in countries emerging from fragility and conflict?
- How can Ministries of Health engage other sectors e.g. education, social and legal systems to strengthen policies that promote health and well-being in developing contexts?

- How do leadership and governance issues affect the effective implementation of health systems strengthening strategies?
- What is the relationship between health systems and new ways of working, for example, how responsive and adaptable are health systems to incorporating new technologies and products?
- What is the role of private sectors actors within health systems and what are the effects of different system interventions on both public and private sector actors?

Foundation Grants

- Feasibility work to identify the health system changes to improve delivery of key health interventions to underserved populations. e.g. family planning, integrated provision of services, a package of measures for prevention and treatment of chronic conditions, quality improvements using various approaches.
- Understanding inequality: developing a strategy to overcome barriers to MCH service uptake in urban communities.
- Preliminary work to address how the range of healthcare providers (government, for-profit, not-for-profit) affect health service access for different groups in society. How can this information be used to strengthen the health system and improve the health of different groups?
- How can we develop an innovative approach to community-based models of care in health systems to respond to evolving demographic, economic and disease profiles?
- How to capture user perspectives to understand the implications of task shifting practices for community health worker performance in relation to quality of care.

Background and scope

For decades health systems in developing countries have come under sustained pressure from interlocking social, political and economic influences; ranging from rapid globalisation, evolving disease burdens, natural disasters, fragile governments and governance systems; weak institutions and poor accountability, all of which create and exacerbate widespread socioeconomic and health inequalities. The growing recognition that the challenges confronting health systems in developing countries require a research response that transcends disciplinary boundaries highlights the urgent need for research to foster genuine interdisciplinary collaborations across social science, biomedical science, and other disciplines.

The funders welcome multidisciplinary applications with strong input from social scientists working in health policy, psychology, anthropology, geography, sociology, economics and/ or political economy and applicants should also ensure they embed research within relevant theoretical frameworks, as evidenced by references, to strengthen applications. Teams should also ensure engagement of researchers with strong health systems expertise and demonstrate knowledge of, and potential contribution to, relevant health systems empirical literature.

Recognising that health systems are complex and multidimensional, this scheme welcomes research that addresses a range of health systems topics including but not limited to questions of governance, institutions, health workforce; financing; private sector, civil society, information systems; products and technologies, service delivery and so on.

Research funded through this call can engage with the contextual dynamics that shape and/or undermine effective health systems in developing countries, but the research must offer practical solutions to implement health care improvements. Where appropriate, studies should illustrate how the findings of this study may contribute to further understanding for other health challenges.

Research impact

Applicants must identify the potential impacts of their research on policy and practice and outline clear relevance to decision makers and practitioners. Projects should identify and address the key barriers to implementation and uptake of evidence-based interventions at local and national levels, paving the way for their successful adoption into routine practice with improved access and use by the populations in need. A central component of this research programme is to build evidence within health systems.

Solutions to strengthening health systems in developing countries must be rooted in, and acceptable to, the institutions, communities, and societies where they will operate. As such, non-academic stakeholders, including potential users of the research, are expected to be included and involved in the design and delivery of projects. Indeed, proposals should demonstrate strong engagement with in-country stakeholders and decision makers from the project inception stage and include appropriate budget for such activities.

Researchers are encouraged to be innovative in the kinds of user engagement, knowledge exchange, communications and research uptake activities they plan to undertake during and beyond the period of research funding. It is important that applicants appreciate that outreach and engagement activities in themselves do not constitute impact. Applicants may find it helpful to refer to the RCUK guidance on developing an impact strategy. (Research Councils UK Pathways to Impact toolkit <http://www.rcuk.ac.uk/innovation/impacts/> and DFID's Research Uptake Guidance https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/200088/Research_uptake_guidance.pdf)

Geographical scope

Priority will be given to research that benefits the most vulnerable populations and/or those in poorly resourced settings. Whilst the funders recognise that many of the world's poor live in middle-income countries, it is a specific objective of this programme to increase the body of research that is specifically relevant to low-income countries, whether through research in those countries or the ability to demonstrate the relevance of experience from middle income countries to low income countries. Applicants must illustrate how the proposed study will strengthen local LMIC health systems.

The funders aim for a significant majority of research projects within the portfolio to focus on low-income countries. For a full list of the countries that fall under the categories of low and middle income countries please refer to the OECD DAC list of ODA recipients. Research teams should include, or be led by, LMIC researchers while research questions and budgets should also reflect a focus on local contexts.

(<http://www.oecd.org/dac/stats/documentupload/DAC%20List%20of%20ODA%20Recipients%202014%20final.pdf>)

All countries of focus need to be adequately justified and a local need identified. The relevance of all countries involved in any multi-country study must also be justified.

Research capacity building

All funders are committed to supporting capacity building in research. Capacity-building elements should be set out in relation to the core intellectual agenda of the research proposal and not treated separately; the focus should be on the quality and impact of the research, and how increasing research capacity contributes to this.

If the Principal Investigator (PI) is based in the UK, there must be clear partnership with, and scientific leadership from, co-investigators (Co-Is) based in the countries where the project will take place. Proposal should demonstrate how capacity building for junior UK and developing country staff will lead to developing future scientific leadership. Good examples of capacity-building include;

- Co-design of research and implementation
- Field-based research methods training for developing country partner staff
- Opportunities for staff to author/co-author journal and conference papers and participate in national and international conferences.

UK investigators should demonstrate an understanding of the national and local health systems context, and work harmoniously and effectively with local stakeholders to ensure the research programme does not undermine local research capacity. These factors will be taken into account by the commissioning panel.

How to apply

Proposals must be submitted to Je-S by the call deadline:

4pm GMT Tuesday 24th January 2016.

Full details on how to apply to this scheme is in the scheme specific guidance on the MRC website.

Proposals can only be accepted by electronic submission through the Je-S system (<https://je-s.rcuk.ac.uk/jes2webloginsite/login.aspx>).

Timeline

- Foundation Grant funding decisions made: April 2017
- Invitations to submit full proposals issued: April 2017
- Deadline to submit full proposals: June 2017
- PI response to reviewer comments: September 2017
- Full stage panel meeting: October 2017

If you have any technical issues with the Je-S system please contact Je-S help desk at JeSHelp@rcuk.ac.uk. Guidance on this system can be found at: <https://je-s.rcuk.ac.uk/Handbook/Index.htm#pages/JeSHelpdesk.htm>

Please contact HSRI@headoffice.mrc.ac.uk with queries about applying to this funding scheme or scheme eligibility.

