WHAT WE WANT TO FUND

We are seeking proposals to undertake research that will strengthen the public health evidence base to address priority evidence gaps in humanitarian settings and contribute to more effective humanitarian response.

With a focus on leading causes of morbidity and mortality, your research question must seek to improve health system functioning, and therefore health outcomes, in a humanitarian setting by addressing one or more health system building blocks (as defined by the WHO). Applicants should apply a systems thinking approach that incorporates the diversity of elements that interact to influence health outcomes in complex, real-world humanitarian settings.

Proposals should be informed by the needs of people who use the health system in the humanitarian setting(s) in which your study will be conducted, and applicants should engage with relevant stakeholders to determine the key health system challenge to be addressed. Your proposal must demonstrate how the research findings will be used by identified stakeholders to strengthen the health system and improve health outcomes at a local, national or global level.

Proposals that focus on vulnerable groups, especially women and girls, are particularly encouraged.

Studies will be up to 18 months in length. We expect activities to start around January 2023, and to be completed by July 2024.

You should ask for a level of funding that is justifiable for your proposed research. We anticipate this will be between £100,000-£400,000, depending on the scope of the study and research uptake objectives. All activities must be feasible within the 18 months period. All
proposals will be assessed for value for money. The number of grants awarded will depend on the quality of proposals received.

ELIGIBILITY AND SUITABILITY

WHO CAN APPLY

As a minimum, your research consortium must include:

✓ A research institution from the country(s) or region(s) in which the research study will take place
✓ An operational humanitarian organisation

As a minimum, your research team members must include:

✓ A principal investigator (or co-PIs)
✓ A research uptake focal point

Team members can come from a range of organisations including academic or other research institutions, operational humanitarian organisations, governmental organisations, individual experts, and local non-governmental or community-based organisations. We encourage the building of collaborative partnerships that respect national leadership and research expertise.

Research teams will need to be ‘positioned for impact’, with established stakeholder relationships in place, and contextual knowledge and understanding reflected in the proposal, demonstrating how uptake and application of research will take place. You must demonstrate that your study team is highly familiar with the key stakeholders relevant to the health system which your research is intended to strengthen. The end users of research findings generated through the study must be closely associated with the team – either as direct team members, or as members of a research Steering Committee or similar.

Given the relatively short time frame of this Call, we particularly encourage applications from established research-practice partnerships with a track record in collaborating on their chosen topic and who can demonstrate a shared focus on working together post-grant to sustain uptake and impact.

Principal Investigator/s

Research teams must be led by an experienced Principal Investigator(s). This individual must have:

✓ A PhD in a relevant academic field
✓ Experience of conducting similar research in equivalent settings
✓ Multiple peer-reviewed articles on relevant topics published in academic journals

Humanitarian partner(s)

Humanitarian expertise will be drawn from a humanitarian organisation located in the country, and preferably the locality, where the study will take place. This partner can be from a relevant government institution responding to the identified crisis, a local NGO, or an in-country based international NGO or other international organisation. The humanitarian partner(s) must be able to demonstrate a commitment to using evidence from the study to inform their humanitarian programmes.
Research uptake focal point
Each team must include a research uptake focal point(s) with the necessary skills, competencies and seniority to oversee strategic uptake and dissemination planning for the study team. The focal point must be well positioned to influence key stakeholders at local, national, regional and/or global levels (as appropriate), and to lead on the coordination of stakeholder engagement and dissemination plans. Further information about our expectations on research uptake and impact can be found in our Research Uptake Guidance note.

Lead applicant
The lead applicant is the organisation which submits the proposal and will manage the research grant if awarded. Any organisation represented by members of the research team can be the lead applicant. We encourage LMIC lead applicants. The lead applicant cannot be a profit-seeking enterprise or an individual (although these may form part of the research team).

The PI is not required to be employed by the lead applicant but can be located within another partner organisation.

The lead applicant organisation must be able to accept our standard grant agreement.

YOUR PROPOSAL

It is important that you consider the following in your proposal:

Research uptake
All of our funded work should have a measurable, positive impact on improving the public health response during humanitarian crises. This means that all research should be designed so that humanitarian stakeholders can and will access the evidence produced, understand it, trust it and be able to apply it to policy and/or practice. To achieve this, research teams will need to be ‘positioned for impact’, with established stakeholder relationships in place or included as team members. Local contextual knowledge and understanding will be reflected in the proposal, and your proposal will demonstrate how uptake and application of research will take place. We anticipate that most team members will be based in the study location and will be available to engage directly with relevant policy or practice stakeholders throughout the study period.

Partnership principles
We promote research partnerships that are based on four principles: equity, mutual benefit, responsibility and transparency. All partners, including those based in the country/region where you plan to conduct research, must be involved in determining the research objectives, study design and budget. This co-creation approach should be applied in question framing, research design and delivery, and influencing strategy as feasible.

Community participation
We promote close collaboration with, and the participation of, people and communities affected by crises as a core tenet of ethical research and humanitarian practice. We encourage engagement with target communities at all stages of the research
process. Our Research Ethics Toolkit provides guidance on how this might be done, with a series of prompts to consider during study design and implementation.

WHAT COSTS WILL WE FUND
You should refer to the Eligible Cost Guidance.

R2HC requires applicants to demonstrate how research findings will impact humanitarian health response, and influence stakeholders. Your budget should include adequate resources for research dissemination and uptake activities.

WHAT WE WILL NOT FUND
The following are ineligible:

- Laboratory-based or clinical trials
- Development of diagnostics
- Systematic reviews

We do not fund research in countries that are not included in the DAC list of ODA recipients, or research involving non-crisis affected populations in low- and middle-income countries.

We will not generally pay for the costs of interventions. If the proposed research is linked to continuation of a specific intervention over the research period, evidence must be provided in the proposal that (other) funds are available to cover such costs. If in doubt, please email r2hc@elrha.org for clarification.

ASSESSMENT CRITERIA
All applications submitted to us are reviewed by our Funding Committee against five criteria:

**IMPACT**
Your application must demonstrate it is relevant to an identified gap/priority and explain how your research will strengthen the existing evidence base. You must demonstrate a viable pathway to impact.

**METHODOLOGY**
Your research methodology must be clearly described and appropriate to the research objectives and the humanitarian context.

**FEASIBILITY**
Your proposal must be realistic in terms of timeframe, budget and anticipated operational challenges. Risks and ethical considerations must be addressed.

**VALUE FOR MONEY**
Your budget must be reasonable for the proposed package of work. Your proposal must represent value for money, balancing the anticipated impact with the level of funds requested.

**PARTNERSHIPS**
Your partnership must include research institutions and operational organisations that will facilitate the implementation of the research and uptake of findings. Your research team must include relevant experience and expertise.
Methodology:
We welcome a variety of research methods, including qualitative and mixed methodologies, and research using primary or secondary data sources. Implementation and social science research is welcomed, as are economic evaluations or cost effectiveness analyses.

Feasibility:
All proposed activities must be conducted in 18 months. You must have considered the operational feasibility of the research given any security or related constraints in the humanitarian context in which the study will take place.

Value for money:
Value for money is primarily evaluated on submission of a Full Proposal application when you will be asked to provide a significantly more detailed budget than is required at Expression of Interest stage.

APPLICATION PROCESS
There will be a two-stage selection process: an initial Expression of Interest (EOI) stage, and a subsequent Full Proposal stage for shortlisted applicants. Expressions of Interest should be submitted through the online Common Grant Application system. You will need to provide:

✓ details of your organisation
✓ information on the proposed research team and partners
✓ proposal abstract
✓ indicative budget and timeline
✓ checklist to confirm you meet all eligibility criteria

Applicants will need to register on the system before proceeding with applications. A link to the application system, where full instructions are provided, is available on the R2HC website.

Deadline:
Expressions of Interest must be submitted online by **17:00 (GMT) on 15 March 2022**.

Timeline:
If you have any questions about the Call you should:

1. Refer to our Frequently Asked Questions on this webpage
2. Attend the launch webinar and other relevant webinars
3. If your question has not been answered through these mechanisms, contact us at: R2HC@elrha.org

Guidancedocuments
We have produced a number of useful reference documents that we encourage you to refer to when developing your application:

- Application Guidance
- Humanitarian Health Evidence Review
- R2HC Research Ethics Tool
- R2HC Research Uptake Guidance Note
- Evidence Review of Gender-Based Violence Research Methodologies
- Due Diligence and Contracting FAQ’s
- Elrha Grant Agreement template
For the purpose of this funding call, we use the following definitions:

**Health system**

The WHO defines a health system as "comprising all the organizations, institutions and resources that are devoted to producing health actions" (WHO, 2000, p. xi) For the purpose of this research call we are interested in research that strengthens *national health systems or their equivalent*. This can include systems providing services specifically for people affected by crises, including refugees or internally displaced people, provided those services are integrated into the wider health system. Proposals will not be considered that address health systems operating separately from, or in parallel to, national health systems or their equivalent.

**Health system building blocks**

WHO outlines six building blocks that interact to strengthen optimal health system: Service delivery; Health workforce; Information; Medical products, vaccines and technologies; Financing; Leadership/governance (page 3, *Everybody's Business: Strengthening Health Systems to Improve Health Outcomes*). These building blocks help to achieve the intermediary goals of access, coverage, quality and safety, which in turn impact on health outcomes, system responsiveness, social and financial risk protection, and improved efficiency.

**Humanitarian settings**

Humanitarian settings can include conflict-affected locations, complex emergencies, environmental crises, and settings hosting refugees or IDPs. UN OCHA (the United Nations Office for the Coordination of Humanitarian Affairs) provides a **global humanitarian overview** that lists countries and regions in which people currently require humanitarian assistance and protection. ACAPS provides an analysis of humanitarian crises by severity level. To be eligible for R2HC funding a crisis must be located in a country this is included in the **DAC list of ODA recipients**. General populations in Low- and Middle-income Countries (LMIC) are excluded unless they have been affected by a humanitarian crisis such as one of those identified above.

**Operational humanitarian organisation (or partner)**

An organisation that is actively delivering programmes in a humanitarian setting. This can include international, national & local NGOs; UN agencies; government departments / ministries; and other non-state actors.

**Research**

Research should include a methodical approach that will address a hypothesis or question. The research must be systematic and adhere to a rigorous protocol. Results will be high quality and publishable in a peer-reviewed academic journal.

The quality of the methodology will be examined by independent technical reviewers and expert members of the Funding Committee as part of the assessment of proposals. Proposals based on methodological approaches that do not meet the standards required to be published in a peer-review journal will not be funded.
Various checklists are available online to inform what should be included in the protocol design for research proposals, or to guide audiences when assessing the quality of published papers. An example is R2HC's Qualitative Research Assessment Tool.

**Research institution or academic partner**
An establishment whose primary aim is undertaking research and whose staff have a track record of publishing in peer-reviewed academic journals. This category could include a government institution with a research focus, or an NGO with a dedicated research department whose staff have a track record of publishing in peer-reviewed academic journals and/or affiliation to an academic institution.

**Systems approach**
Systems approach has been described as “a way of addressing health delivery challenges that recognises the multiplicity of elements interacting to impact an outcome of interest and implements processes or tools in a holistic way”. Such an approach allows for consideration of how proposed improvements to health outcomes will operate in complex, real-world humanitarian settings. Systems approach to health service design, delivery and improvement: a systematic review and meta-analysis | BMJ Open
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