Health systems research initiative call 8 – outline stage

Opportunity status: Open

Funders: Medical Research Council (MRC)

Funding type: Grant

Publication date: 14 October 2020

Opening date: 14 October 2020

Closing date: 19 January 2021 16:00 UK time

Last updated: 23 October 2020

This call welcomes applications that address a challenge faced by health systems.

Proposals must situate this challenge within an understanding of the broader health system linkages and describe how and why findings have the potential to improve the health of people living in low and middle-income countries (LMICs).

Funds requested by LMIC research organisations (ROs) will be funded at 100% of the full economic cost. Funds requested by UK ROs will be funded at 74% full economic cost. LMIC and UK indirect costs can be included.

Projects can be up to five years duration.

Who can apply
Where the research can take place

Studies funded through this scheme should be based in LMICs, excluding the exceptions listed below. World Bank definitions of low and middle income economies can be found at Development Assistance Committee list of official development assistance recipients.

Exceptions: please note that from 2020/21 our partnerships with China and India have a renewed focus: applications involving China or India must have global or regional development impact as the primary objective, with local or national impacts within China or India as secondary objectives.

Who can apply

This call is open to and particularly encourages researchers to apply from LMICs as well as the UK. If an application is UK led, there must be clear partnership with, and scientific leadership from, the countries where the project will take place.

Principal investigators

This scheme is open to principal investigators who are employed by eligible research organisation based in LMICs where the work will take place and to principal investigators who are employed by an eligible UK institution.

Applicants based in China or India are not eligible to be the principal investigator of an application to this call but are welcomed as international co-investigators within proposals.

Eligible UK institutions include UK higher education institutions (HEIs), research council institutes, and eligible independent research organisations (IROs).

Check your organisation is eligible for funding.

For researchers based in LMICs, eligible institutions include HEIs and non-profit research institutions. If the application is submitted by an LMIC organisation, the primary headquarters of that organisation must be in one of the LMIC countries where the research will take place.

This means that the institution sponsoring a principal investigator must be legally registered in the UK or in a LMIC and the principal investigator must be employed by the institution that is hosting the research.

Research institutions based outside the UK will be asked to complete additional eligibility and financial checks before an award is offered, and awards will be dependent on satisfactory completion of those checks and on-going monitoring.

MRC units and institutes can apply to this call, usual rules for funding grants to MRC units and institutes will apply. If you are based at an MRC unit or institute, please contact your local MRC research support office for further information.

It is not permitted for the same person to be a principal investigator on more than two proposals submitted to this call.
Co-applicants and collaborators

The nature of this scheme means that we would expect applicants to be predominantly based in LMICs.

Funding for co-applicants and collaborators in other regions can be requested, but we would expect that the majority of funds would support the costs in the LMIC where the research will be conducted.

Investigators employed by an institution in China, India or a high-income country outside the UK cannot be a PI on a proposal but can be a co-investigator and are expected to make a significant contribution to their own research costs, including covering their own overheads.

Institutional support

Support will be conditional on all required ethical, legal and regulatory approvals being obtained before the research commences.

Please note that ethics approval should be obtained from a UK ethics committee as well as in any countries hosting the grant.

Resubmissions

We are not able to accept resubmissions of proposals that have already been considered under this scheme.

If you have substantially changed a previous proposal and wish to discuss whether it might be eligible, please contact HSRI@mrc.ukri.org.

What we're looking for

Objective

The purpose of this scheme is to provide funding for the best proposals to generate new knowledge to strengthen and improve health systems in LMICs. The programme’s aims are to fund methodologically rigorous, high-quality interdisciplinary research that will:

- generate evidence on:
  - the structure and dynamics of health systems
  - how to strengthen and improve health systems for people living in LMICs through the delivery of evidence-based interventions or structural changes (for example strengthening governance, management, health workforce or supply chain).

- provide evidence that is of direct relevance to decision makers and practitioners in the field, linking health systems with defined outcomes (for example: health, confidence, financial protection)
- demonstrate an appreciation of current theories and frameworks in health systems research and/or other social or political science theory of relevance to health systems
- where focused on a particular aspect of the health system, proposals must demonstrate how interventions relate to and affect wider elements of the system such as governance, financing, health workforce, information systems, service delivery, etc.

Please note: Funding is available for research only. We will not fund the routine delivery of health services.

**Priorities for this call**

The funders welcome multidisciplinary, collaborative and multi-country or multi-site applications as well as focused in-depth applications, including those driven by social science questions.

Applicants should also ensure they embed research within relevant theoretical frameworks.

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 identifies and addresses a range of health systems topics including but not limited to questions of governance, structure, institutions, social policy, health workforce, financing/trade, private sector, civil society, information systems, products and technologies, supply chains, service delivery and so on.

Research funded through this call could:

- engage with the contextual dynamics that shape and/or undermine effective health systems in developing countries
- offer practical solutions to implement health care improvements
- evaluate the health system at scale
- illustrate how the research findings can contribute to increasing knowledge and to the discourse for addressing 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 sustainable 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 on and within health systems. We also encourage the exploration of assumptions, and of broader
conceptual and structural matters such as power and economic organisation which have longer term impact.

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 Foreign, Commonwealth & Development Office (FCDO) research uptake guidance.

**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 contribute to strengthening low-income country health systems.

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 strengthening research capacity within LMICs and the UK. Grants funded through this scheme are expected to contribute to the development of equitable and sustainable global research systems.

Applicants are encouraged to start discussing priorities as early as possible, in consultation with key stakeholders within and outside of the project team (for example: researchers, data collectors, managers, practitioners, grass roots organisations, policymakers and research management offices).
The proposed approach to capacity building will be assessed as part of the review process and will help to demonstrate the equity of the partnership. Examples of capacity building include, but are not limited to:

- building leadership skills amongst early career researchers
- opportunities for mutual learning across the project team (such as through staff exchanges), for example, in the subject of the research, the context where it is being conducted, engagement with policy-makers and research management
- building capacity to working collaboratively, across disciplines and across practice-research boundaries (for example with policy-makers, managers and practitioners in the system)
- providing mentoring to improve the capacity of less experienced researchers to generate new knowledge and attain policy impact
- team members attending training courses to develop specific expertise or obtain relevant qualifications (excluding Masters and PhDs)
- opportunities for staff and associated health managers to author or co-author journal and conference papers and participate in national and international conferences
- building organisational capacity, (for example in management, finance or communications)
- formation of LMIC research networks.

UK investigators should demonstrate an understanding of the national and local health system 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.

**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.

- What local and national contextual factors are most important in promoting and sustaining health system improvement?
- How can governance innovations that promote better performance and accountability within health systems be encouraged and spread over time?
- What influences how responsive health systems are to incorporating new delivery models, technologies, products, etc. that improve processes and outcomes? How can greater adaptability and innovativeness be encouraged?
- How can health systems better meet the needs of specific groups (women, children, people with disabilities, LGBT+) in countries emerging from fragility and conflict?
- How can community health systems become more interlinked and institutionalised?
- How can Ministries of Health engage other sectors, such as trade, education or social and legal systems, to strengthen policies that promote health and well-
being in developing contexts?

- How can newly introduced and already existing or ongoing processes of decentralisation be adapted over time to support positive consequences for service delivery and population health?
- How can private sector actors within health systems be deployed to improve functioning and performance of the overall health system?
- What strategies can assist health systems in addressing declining foreign aid and promoting sustained strong performance?
- How and why has civil society action supported (or not) health policy change for system strengthening, and with what limits, in a particular context or across contexts?

In recognition of the current COVID-19 pandemic, the funders welcome proposals to research the impact of the pandemic on health systems (this does not need to focus directly on COVID-19, it could explore wider health systems research beyond containing the infection, for example knock on effects on health systems provision) and examine ways to enable health systems to respond to this or future pandemics more effectively:

- How can health systems be equipped to cope with epidemics or pandemics and how can they be strengthened post-pandemic so that other diseases are not neglected?

Please note, COVID-19 related proposals will be assessed according to the scheme specific assessment criteria in a competitive manner with wider non-COVID-19 research proposals. No specific budget is allocated.

All applicants are expected to provide an honest assessment of how the pandemic might affect the research plans.

**Funding available**

There is an expected £3-4m available for this call from the UK FCDO, the UK Medical Research Council (MRC), and Wellcome, in collaboration with the UK Economic and Social Research Council (ESRC).

You may request support for all research costs that are attributable to the project. For example, appropriate percentages of the investigators’ time, scientific, technical and administrative staff including statisticians, research nurses etc., consumables, items of equipment, data or sample handling and archiving and travel.

UK research will be funded at 74% of the full economic cost. Research incurred by overseas research organisations and investigators is eligible to be funded at 100% of full economic cost.

Regulation, ethical review and liability may vary across different countries. Principal Investigators and proposed sponsors should ensure that they have adequately understood the feasibility and costs of participation of proposed international centres.
For example, insurance arrangements will vary between countries and the sponsor (usually the host institution) is responsible for ensuring adequate arrangements are in place at each site.

Research grants should, as far as it is practicable, be fully developed and costed before they are allowed to start.

However, we recognise that preliminary work is often needed in order for applicants to develop innovative partnerships and proposals.

In this instance applicants are directed to the foundation grant call which will open in January 2021.

Foundation grants are smaller and shorter, and can either be exploratory, stand alone studies, or pilot/feasibility work expected to lead to a larger research project in future. See ‘additional information’ below for further details.

If you would like to discuss whether your research fits the remit, please contact HSRI@mrc.ukri.org.

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**How to apply**

Applications will be submitted to and processed by MRC on behalf of the partner funding agencies.

This research grant call has a two-stage application process: an obligatory outline stage and a full application stage. Decisions for invitation to the full stage are expected in March 2021 with funding decisions expected in October 2021.

Please see the call specific guidance document for detailed information on how to apply. Applications which do not follow the guidance set out in this document may be rejected.

When applying select:

- council: MRC
- document type: outline proposal
- scheme: MRC Jointly funded initiatives outline

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**How we will assess your application**

Applications will be considered by an expert panel convened specifically for this scheme jointly agreed by MRC, FCDO and Wellcome, in collaboration with ESRC.

Additional scientific experts will be invited to provide written comments if the funders and/or panel chair deem this necessary.
The panel's decision will be final and will not be open to appeal.

Please ensure that all necessary information is incorporated in your application as there will not be an opportunity to add additional information after submission.

Contact details

If you have any technical issues with the Je-S system please contact the Je-S helpdesk on JeSHelp@je-s.ukri.org.

Please contact HSRl@mrc.ukri.org with queries about applying to this funding scheme or scheme eligibility.

Additional info

Supporting documents

- Research Grant Outline Stage Guidance: Call 8 (PDF, 308KB)
- Details of funded projects (PDF, 691KB)
- Frequently asked questions (PDF, 71KB)

Foundation grant funding

Foundation grants are smaller and shorter, and can either be:

- exploratory, for example, retrospective, diagnostic analyses looking into existing health systems, investigating the underlying causes beneath perceived problems or to explore possible health system innovations, under-researched areas, or creative approaches that have the potential to be developed further
- to conduct pilot work to build the necessary knowledge and methodological base to support a future full proposal, this could include work to pilot an intervention, feasibility or preliminary work to conceptualise broader research questions on the health system.

The foundation grant application process requires a single step (there is no outline stage). The call will be launched in January 2021 and call specific guidance will be provided.

Please note, foundation grant applications are expected to be up to two years duration and up to £200k.

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 research grant through the standard competitive process.

Funding partners
The FCDO, MRC and Wellcome jointly fund this call in collaboration with ESRC. 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 LMICs.

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.

**Terms and conditions**

Funded grants will be managed according to UKRI’s standard terms and conditions.

**Other funding opportunities open to LMIC applicants**

- [Applied global health research board](#)
- [Joint global health trials](#)

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**Timeline**

- **14 October 2020**
  - Opening date

- **19 January 2021**
  - Deadline for outline proposal

- **March 2020**
  - Decision on outline proposal

- **16 June 2021**
  - Invited full application deadline

- **October 2021**
  - Final decisions

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