

# Call for proposals – mentor institute

Institutionalizing learning by mainstreaming  
embedded implementation research in country  
immunization programmes (MAINSTREAM) in  
**Madagascar**

**Published :** 25 March 2024

**Deadline :** 25 April 2024, 23:59 CEST



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## Overview

The Alliance for Health Policy and Systems Research and UNICEF are seeking a country-based mentor institute (or consortium) based in **Madagascar** for their joint initiative with Gavi, The Vaccine Alliance on **Institutionalizing learning by mainstreaming embedded implementation research in country immunization programmes (MAINSTREAM)**. The mentor institute/consortium (referred to hereafter as the mentor institute) will provide technical mentorship in implementation research to local research teams, as well as local organizational facilitation, convening of in-country stakeholders, and administration of all aspects of the initiative. This is not a call for research proposals.

## Background and objectives

Gavi-funded programmes reach millions of children across priority countries each year with essential vaccines. A key focus of Gavi 5.0 (1) is to reach under-immunized and zero-dose children – requiring strengthening delivery systems in countries, overcoming barriers faced by caregivers and working with communities to build trust in and demand for immunizations. Yet, gaps remain in the optimization of programme delivery, which have resulted in persistent problems in equitable access and coverage and missed targets or delays in progress.

Insufficient effort to learn – effectively and continuously – from existing evidence and data has been identified by Gavi and other stakeholders as a key cause of suboptimal programme delivery. Gavi’s 5.0 strategy emphasizes the importance of engendering a learning culture into its own work as well as country-based immunization programming, with the vision of evidence-informed learning as a foundation for continuous improvement. The mission of this learning strategy is to provide the “right information, to the right people at the right time to improve performance in leaving no one behind with immunization”.

A key reflection of the learning gap has been the limited generation and use of contextual evidence to bring about improvements in programme implementation at country and local levels. This need has been recognized by Gavi and its partners and addressed in part through investments in embedded implementation research over the past five years (2). While these initiatives have achieved modest success commensurate to the scale of efforts, a sustainable and comprehensive solution for the widespread learning deficit in programme delivery is still elusive.

A consortium consisting of the Alliance for Health Policy and Systems Research (the Alliance) / WHO Science Division and UNICEF's Primary Health Care and Health Systems Strengthening (PHC-HSS) Unit, New York in a coordinating role, together with the WHO Immunization, Vaccines, and Biologicals (IVB) Department, WHO and UNICEF regional and Madagascar country office, and Gavi, The Vaccine Alliance is launching the MAINSTREAM initiative with the following objectives:

- Assess knowledge gaps and priorities regarding immunization coverage and equity based on policy-maker/implementer priorities, aligned with country research agenda development and implementation (needs assessment objective);
- Enable the integration of learning through embedded implementation research into national immunization programmes (Implementation research integration objective);

- Scale up learning through embedded implementation research on implementers' priorities as part of regular country support (scale objective); and
- Improve the use of evidence to guide policy development and implementation of programmes toward improving immunization coverage and equity (policy and practice objective).

To help execute this initiative, the Alliance and UNICEF will identify, engage and support an in-country academic/research institution as a mentor institute in collaboration with government and other in-country stakeholders.

The mentor institute will:

- support the government by organizing country-level stakeholder meetings to define the scope and priorities for embedded implementation research through a multi-stakeholder workshop;
- select multiple decision-maker-led country research teams;
- facilitate and mentor research teams; and
- organize protocol development and country dissemination workshops.

The mentor institute will be an academic/research institution based in Madagascar that will provide technical mentorship in implementation research to the research teams, and local organizational facilitation and administration of all aspects of the initiative. The mentor institute will work in close collaboration with government and other in-country stakeholders and will operate with oversight from the Alliance and UNICEF secretariats as coordinator of the initiative.

Through this call, we are seeking bids from interested institutions in Madagascar with teaching/training capacity in implementation research, and financial and administrative capability to serve as the mentor institute.

## Specific tasks of the mentor institute

- In collaboration with the Alliance and UNICEF, the government and in consultation with Gavi Senior Country Managers (SCMs) as appropriate, convene a priority-setting workshop with in-country stakeholders at the national and/or subnational level to identify and prioritize key implementation barriers for the immunization programme and draw on these challenges to develop priority research questions for research grants. This includes arranging logistics and local travel, invitations, developing the agenda and facilitation, recording minutes and preparing reports of the workshop.
- Develop and issue a call for implementation research proposals from in-country stakeholders, based on the priorities identified, for teams led by in-country health system decision-makers. Arrange transparent review and selection of proposals for funding support.
- Make subgrants to the selected research teams for undertaking the research.
- In collaboration with government, convene a protocol development workshop to assist selected research teams in developing sound implementation research protocols. This includes arranging logistics and local travel, sending invitations, developing the agenda and facilitation, recording minutes and preparing reports of the workshop.
- Facilitate submission of research plans to local Institutional Review Boards and government ethics review committees, as needed, for ethical clearance.
- Provide technical assistance to research teams throughout the entire research process.
- Ensure quality assurance throughout the implementation research cycle – from protocol development to data collection and analysis, write up, dissemination and utilization of research findings.
- Monitor the implementation of research grants ensuring timely deliverables. Make regular progress reports to the Alliance Secretariat and UNICEF on process, outcomes, challenges and recommendations for improvements.
- Support research teams to translate research findings into a project report, recommendations, policy briefs and presentations.
- In collaboration with government, convene at least one dissemination workshop focused on utilization of the research findings by in-country stakeholders, including arranging logistics and local travel, invitations, developing the agenda and facilitation, recording minutes and preparing reports of the workshops.
- Edit and finalize article(s) for an academic journal including supporting preparation and submission of manuscript(s) by the grantees and convening a team of co-editors.

## Eligibility and selection criteria

To be *eligible* to be considered as a mentor institute, the following criteria apply:

- Geographically located in Madagascar.
- All sections of the proposal, as well as the maximum proposal length, duly completed and considered.
- Compliance with budget allocation specifications (described below).
- At least 50% of the named team members on the bid should be women.

To be competitive as a mentor institute, the following *selection* criteria apply:

- Demonstrable leadership experience in the public health community in the respective country (essential) and globally (desirable).
- **Strong networks and demonstrated relationships with the National Immunization Programme and/or Essential Programme on Immunization (EPI) and Ministry of Public Health**
- Strong reputation and experience in health systems and implementation research, and in research mentorship.
- Administrative capacity to issue and manage subgrant contracts to research teams in Madagascar.
- Track record of working with the government on issues relevant to the call.
- Experience of service on government boards or committees on topics of relevance (desirable).

The selection committee will also consider how the proposal responds to the following additional factors:

- Value for money
- Monitoring and evaluation of this programme of work

The selected mentor institute will be expected to work independently, regularly completing and reporting on agreed products, while maintaining an ongoing collaborative relationship with the Alliance, UNICEF and the government.

## Funding and period

The maximum amount of funding available from the Alliance and UNICEF will be US\$ 314 000 over the period 1 May 2024 – 30 July 2025. No further funding will be provided by the Alliance or UNICEF within and beyond the project period.

One research prioritization workshop with local stakeholders, one protocol development workshop for research teams, and one dissemination workshop should be included, as should the costs of monitoring the

implementation of research grants. At least 70% of the total budget should be reserved for the grant awards to at least seven implementer-led research teams. No more than 15% of the total budget should be used for project management and staff salary costs. Institutional overheads (not including project staff) should not exceed 10%.

## Application process

**Deadline: 25 April 2024, 23:59 CEST**

**Bids submitted after this deadline will not be considered.**

Successful applicants can expect to be notified within one month of the deadline. WHO may, at its own discretion, extend this closing date for the submission of bids by notifying all applicants thereof in writing.

Submissions of bids should be made at [alliancehpsr@who.int](mailto:alliancehpsr@who.int). Please use the subject: **WHO/UNICEF Bid Ref. Call for a Mentor Institute (Madagascar)**.

**Language:** Bids may be submitted in English or in French. *If a bid is submitted in French, an English translation and/or a 250-word summary in English should accompany the bid.*

Submissions of **no more than eight pages** (standard font size 11, 1.15 line spacing, normal margins), should include the following:

- **Contact details:** Name of the bidding institution, including contact details and name of a key contact person.
- **Motivation for applying:** A description of how this work fits in with the bidder's expertise and aligns with current areas of work in teaching and training in implementation research.
- **Composition of the proposed team:** names, expertise, function in institution, gender, role in the team and experience relevant to the call. CVs may be included as an annex to the submission.
- **Project plan:** Description of a 15-month plan based on the outlined specific tasks of the mentor institute and the selection criteria outlined.
- **Itemized budget** for 15 months based on the specific tasks outlined, especially the workshops (one each for research prioritization, protocol development and dissemination). This call will not fund equipment or support for hiring new permanent teaching staff. The budget should be in US\$. Please also provide a **summary budget** of the total costs broken down by the following categories (not all may be applicable): personnel, supplies/facilities, equipment, communications, travel and per diem, and other (meetings, publications, etc.). The costs of peer-reviewed research publications/ special issues will be supported by the Alliance Secretariat and should not be included in the budget. The Alliance and UNICEF may challenge proposed costs that they do not consider appropriate or as offering optimal value for money.

## Notes for applicants

1. WHO may, at any time before the closing date, for any reason, whether on its own initiative or in response to a clarification requested by a (prospective) applicant, modify the bid by written amendment. Amendments could, inter alia, include modification of the project scope or requirements, the project timeline expectations and/or extension of the closing date for submission.
2. All prospective applicants that have submitted a bid will be notified in writing of all amendments to the bid and will, where applicable, be invited to amend their submission accordingly.
3. Applicants should note that WHO reserves the right to:
  - a. Award the contract to a bidder of its choice, even if its proposal is not the lowest;
  - b. Award separate contracts for parts of the work, components or items, to one or more bidders of its choice, even if their proposals are not the lowest;
  - c. Accept or reject any proposal, and to annul the solicitation process and reject all proposals at any time prior to award of contract, without thereby incurring any liability to the affected bidder or bidders and without any obligation to inform the affected bidder or bidders of the grounds for WHO's action;
  - d. Award the contract on the basis of the Organization's particular objectives to a bidder whose proposal is considered to be the most responsive to the needs of the Organization and the activity concerned;
  - e. Not award any contract at all.
4. WHO has the right to eliminate bids for technical or other reasons throughout the evaluation/selection process. WHO shall not in any way be obliged to reveal, or discuss with any bidder, how a proposal was assessed, or to provide any other information relating to the evaluation/selection process or to state the reasons for elimination to any bidder.
5. WHO is acting in good faith by issuing this RFP. However, this document does not oblige WHO to contract for the performance of any work, nor for the supply of any products or services.
6. WHO also reserves the right to enter into negotiations with one or more bidders of its choice, including but not limited to negotiation of the terms of the proposal(s), the price quoted in such proposal(s) and/or the deletion of certain parts of the work, components or items called for under this RFP.
7. Within 30 days of receipt of the contract, the successful bidder shall sign and date the contract and return it to WHO according to the instructions provided at that time. If the bidder does not accept the contract terms without changes, then WHO has the right not to



proceed with the selected bidder and instead contract with another bidder of its choice.

8. WHO reserves the right, subject to considerations of confidentiality, to acknowledge the existence of the Contract to the public and publish and/or otherwise publicly disclose the Contractor's name and country of incorporation, general information with respect to the work described herein and the Contract value. Such disclosure will be made in accordance with WHO's Information Disclosure Policy and shall be consistent with the terms of the Contract.

## References

- (1) Gavi Strategy Phase V (2021-2025). Geneva, Switzerland: Gavi, the Vaccine Alliance; 2021 (<https://www.gavi.org/our-alliance/strategy/phase-5-2021-2025>, accessed 20 October 2023).
- (2) Ghaffar A, Langlois E, Rasanathan K et al. Strengthening health systems through embedded research. Bull World Health Organ. 2017 Feb 1; 95(2):87. doi: [10.2471/BLT.16.189126](https://doi.org/10.2471/BLT.16.189126).



### Contacts

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